

Users' Guide to USAID/Washington Population, Health and Nutrition Programs



**Center for Population, Health and Nutrition
Bureau for Global Programs, Field Support and Research
U.S. Agency for International Development**

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Forward:

Kindly note, this is an interim update of the Users' Guide. The main purpose of this update is to ensure you have a current project listing. Because the agency reorganization has not yet been finalized as of this writing, we plan to use the next version of the Users' Guide, to be issued in both hard copy and electronic formats, to convey information on the organizational structure of the new Bureau for Global Health.

Part I of the guide provides a basic overview of USAID's PHN program, as well as a short description of the PHN Center and the offices that comprise it. Parts II, III, IV, and V give a comprehensive listing of PHN projects, including selected regional bureau projects. The descriptions are organized by office, alphabetically within the offices by division, and alphabetically within the divisions by project title. Each project/activity description includes a short summary of the services and activities that each performs, as well as names of contractors and USAID contact persons. Additional information, such as project/activity number, agreement number, and completion date are given. Part VI of the guide includes contact lists for parties listed in this Guide, as well as other useful resources.

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Table of Contents

Introduction

Foreward & Reorganization Notes	2
Table of Contents	3

Part I - The Center for Population, Health and Nutrition

Introduction the the Center for Population , Health and Nutrition (PHNC)	7
--	---

Part II - Project Directory: Office of Population

Contraceptives & Logistics Management Division (CMT)

Central Contraceptive Procurement	14
DELIVER	15
Family Planning Logistics Management (FPLM/CDC)	16

Communication, Management & Training Division (CMT)

Improving the Performance of Primary Providers in Reproductive Health (PRIME II)	17
Information, Education, and Communication Support Project (IEC)	18
Management and Leadership Development (M&L)	19
Population Fellows Program (Michigan Fellows)	20
Population Information Program (PIP)	21
Population Leaders Program (PLPII)	22
Training in Reproductive Health III	23

Family Planning Services Division (FPSD)

ADVANCE Africa	24
CARE RH Trust Fund	25
Commercial Market Strategies (CMS)	26
Catalyst Consortium(Family Planning/Reproductive Health Services)	27
IPPF/WHR Endowment	28
LINKAGES: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition	29
Program for Voluntary Surgical Contraception and Related Services	30
PVO/NGO Networks: CARE MoRR	31
PVO/NGO Networks: ENABLE	32
PVO/NGO Networks: NGO Networks for Health	33
YouthNet	34

Policy & Evaluation Division (P&E)

Expert Studies of Population Issues	35
MEASURE: BUCEN Survey and Census Information, Leadership, and Self-Sufficiency	36
MEASURE: CDC	38
MEASURE: CDC/DRH	39
MEASURE: Communication	40

MEASURE: DHS+	41
MEASURE: Evaluation	42
POLICY II	43

Research Division (R)

Contraceptive Research and Development (CONRAD III)	44
Contraceptive Technology Research (CTR)	45
Natural Family Planning & Reproductive Health Awareness (The AWARENESS Project)	46
Population Technical Assistance (POPTECH)	47
The Population Council Program III	48
Reproductive Health Operations Research (FRONTIERS)	49
WHO Special Program of Research, Development and Research Training	50

Part III - Project Directory: Office of Health and Nutrition

Child Survival Division (CS)

ARIVAC	52
Acute Respiratory Infections Vaccine Project	52
Basic Support for Institutionalizing Child Survival II (BASICS II)	53
The CHANGE Project	54
Behavior Change Innovation/State-of-the-Art Activity	54
Child Health Research:	55
Applied Research in Child Health (ARCH)	55
Child Health Research: ICDDR,B: Centre for Health and Population Research, Bangladesh	56
Child Health Research: Family Health and Child Survival (FHACS)	57
Child Health Research: International Clinical Epidemiology Network (INCLEN)	58
Child Health Research:	
World Health Organization/Child and Adolescent Health and Development	59
Children's Vaccine Program (CVP): Vaccine Independence Initiative (VII)	60
HealthTech IV: Technologies for Child Health	61
Helen Keller International (HKI)	62
International Broadcasting Bureau/Voice of America	63
International Children's Vaccine Training Program: Vaccine Quality Assurance Training Program	64
Maternal and Child Health Technical Assistance and Support Contract (TASC)	65
Micronutrient Global Leadership	66
Micronutrient Operational Strategies and Technologies (MOST)	67
Micronutrients for Health (JHU)	68
Polio Eradication and Immunization Support	69
Polio Eradication and Immunization Support	70
Polio Eradication and Immunization Support	71
Polio Eradication and Immunization Support	72
Vaccine Endowment	73

Environmental Health Division (EH)

Africa Integrated Malaria Initiative (AIMI)	74
Environmental Health Project (EHP II)	75
Vulnerable Children and War Victims Results Package: Displaced Children and Orphans Fund ...	76

Health Resources Support II:Office of International and Refugee Health/DHHS	77
Vulnerable Children and War Victims Results Package: The Patrick J. Leahy War Victims Fund ..	78
Infectious Diseases Results Package:Centers for Disease Control and Prevention IAA	79
Infectious Diseases Results Package: NIH - Tuberculosis Research and Training	80
Infectious Diseases Results Package: World Health Organization Umbrella Grant	81
Malaria Vaccine Development Program (MVDP)	82
NetMark	83
Onchocerciasis Control Program (OCP)	84
Tuberculosis Coalition For Technical Assistance (TBCTA)	85

Health Policy & Sector Reform Division (HPSR)

Applied Research in Child Survival Services: Quality Assurance II	86
Data for Decision Making II: Global Health Council	87
Data for Decision Making II:Population, Health and Nutrition Information (PHNI)	88
Partners for Health Reform plus (PHRplus)	89
Infectious Diseases Results Package:Centers for Disease Control (CDC)/Infotech	90
Monitoring, Evaluation, and Design/Assessment Support (MEDS)	91
Quality Assurance/Human Resources Management	92
Rational Pharmaceutical Management Plus (RPM Plus)	93
U.S. Pharmacopeia Drug Quality and Information (USPDQI)	94
WHO Strengthening of Health Services (SHS)	95

HIV/AIDS Division (HIV/AIDS)

AIDS Social Marketing (AIDSMark)	96
Community REACH	97
Global Health Council	98
HIV Operations Research (HORIZONS)	99
Implementing AIDS Prevention and Control Activities (IMPACT)	100
International HIV/AIDS Alliance	101
Joint United Nations Programme on HIV/AIDS (UNAIDS)	102
The Synergy Project	103
U.S. Bureau of the Census	104
U.S. Peace Corps	105

Nutrition & Maternal Health Division (NMH)

Food and Nutrition Technical Assistance (FANta)	106
LINKAGES: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition	107
Maternal and Neonatal Health Program (MNH)	108
UNFPA - Reproductive Health	109
Unicef Maternal Newborn Health	110
WHO Maternal and Newborn Health	111

Health & Nutrition Front Office (HN)

Health and Child Survival Fellows (HCSF) Program	112
Technical Advisors in AIDS and Child Survival (TAACS)	113
The Centre for Development and Population Activities (CEDPA)	114

Part IV - Office of Field & Program Support (OFPS)

Program Activities Support (PAS) Support Services Contract	116
Roles & Responsibilities	117

Part V - Regional Bureaus + Private & Voluntary Cooperation

AffR:Support for Analysis and Research in Africa II (SARA II)	121
ANE: ANE Regional HIV/AIDS Program	122
E&E: Health Partnerships Program	123
LAC:Hurricane Reconstruction:Centers for Disease Control and Prevention	124
LAC: LAC Regional Health Priorities Strategic Objective	125
PVO: PVO Child Survival Grants Program	127

Part VI - PHN Information Directories

Phone Directory & JPPC List	129
USAID Mission Contacts	130
PHN Cooperating Agencies, Contractors and Grantees	135
PHN Cooperating Agency, Contractor and Grantee Field Offices	146
Reference Matrix	170

Part VII - Users' Guide Index

Index	171
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Introduction to the Center for Population, Health and Nutrition (PHNC)

The Challenge Ahead

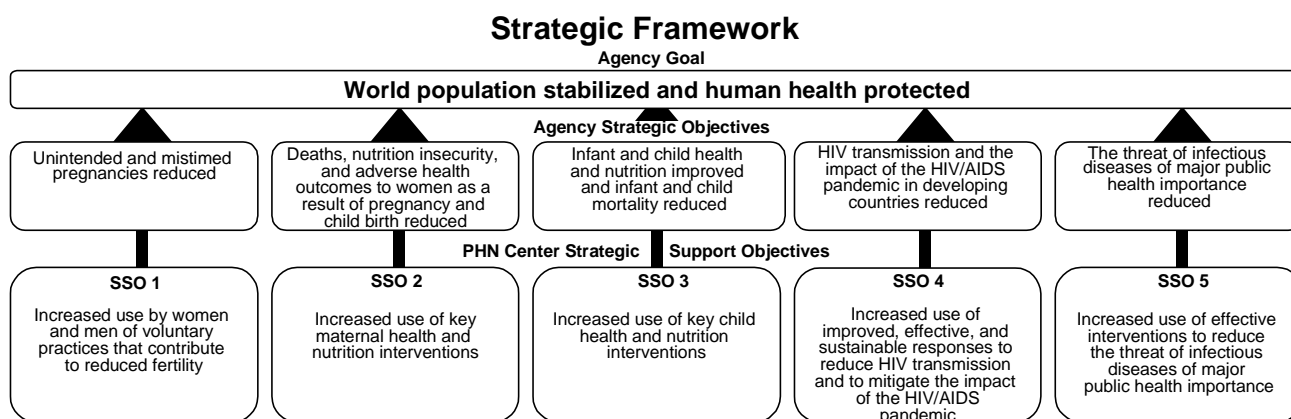
For thirty years, USAID has worked to improve the quality of life for millions of people around the world. Through its global programs in family planning and reproductive health, infectious disease prevention and control, child survival, maternal health and other life-saving areas, USAID has prevented suffering and saved countless lives. However, the current state of population, health and nutrition worldwide reveals daunting challenges:

- World population is expected to increase in 30 years from 6.0 billion today to over 8 billion, yet over 150 million women have an expressed unmet need for family planning.
- Over 580,000 women die annually from preventable pregnancy-related causes. More than 12 million children under five still die each year in the developing world.
- The total number of HIV-infected persons worldwide is expected to have reached 60 million by the end of 2000.
- Over half of all child deaths are thought to be associated with malnutrition.
- Malaria and tuberculosis are on the rise, and together claim the lives of more than 4 million people each year.

USAID's Strategy for Its Population, Health and Nutrition (PHN) Program

Based on these challenges and the lessons learned through its extensive development experience, USAID's goal in the population, health and nutrition sector is to **stabilize world population and protect human health**. In order to achieve this goal, the Agency has adopted a strategy based on five objectives:

1. Unintended and mistimed pregnancies reduced.
2. Infant and child health and nutrition improved and infant and child mortality reduced.
3. Death and adverse health outcomes to women as a result of pregnancy and child birth reduced.
4. HIV transmission and the impact of the HIV/AIDS pandemic reduced.
5. The threat of infectious diseases of major public health importance reduced.



The Population, Health and Nutrition Center's (PHNC) program focuses on improving the quality, availability, and use of key services in family planning, reproductive health, child survival, HIV/AIDS, infectious diseases and other health areas, with special cross-cutting emphases on sustainability, gender and integration of interventions.

Funding

USAID strongly supports PHN activities through a variety of programs in many countries. From 1985-1998, USAID provided approximately \$11.6 billion in PHN assistance to developing countries, making it the largest international donor in this sector in the world. In FY 1999, appropriations for the sector totaled \$836 million.

Programming and Resource Allocation

In addition to organizing priorities around its five strategic objectives, the PHNC has focused on selected priority countries. These countries, as shown in the **Joint Programming and Planning Country (JPPC) Strategy**, are selected on the basis of program efficiency and potential impact, as well as any special considerations.

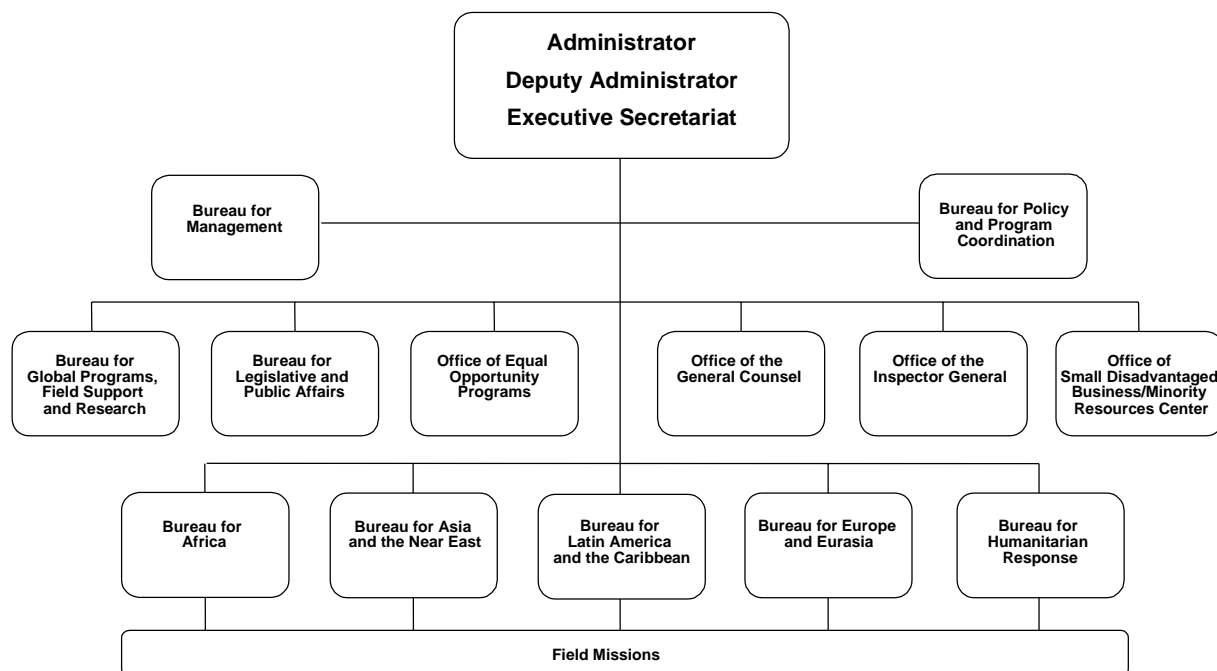
Joint Programming countries are those with the highest potential for worldwide (as well as local or regional) impact in the PHN arena. A significant level of PHNC resources, both in terms of technical staffing and field support, are committed to achieving results in these countries. **Joint Planning** countries are other sustainable development countries with lesser global impact, but which have important PHN sector activities and can access PHNC technical support through field support funding. Certain countries are termed **Special Circumstance** countries because of investments made to date, policy considerations, or crisis conditions.

Agency Structure

Along with four Regional Bureaus (Africa; Asia & Near East; Latin America & Caribbean; and Europe & Eurasia) and the Bureau for Humanitarian Response (BHR), USAID's **Global Bureau** provides technical and programmatic expertise to USAID's field offices ("missions") overseas. Formally called the "Bureau for Global Programs, Field Support and Research," the Global Bureau is divided into five "Centers of Excellence." The PHNC is one such Center, and corresponds to one of the Agency's five focus areas.

The Global Bureau focuses on **global leadership, technical support to the field, and research and evaluation**. The PHNC performs these functions by forging strong relationships with its partners, which include USAID field missions and regional bureaus, the NGO community, host governments, multilateral organizations, foundations and other bilateral agencies.

U.S. Agency for International Development



Global Leadership: USAID is a recognized world leader in the population, health and nutrition sector and has contributed to major innovations in this field, such as: new and improved contraceptive methods, improved public and private sector service delivery systems, a global Child Survival initiative, and the mobilization of the international community in response to the HIV/AIDS pandemic. The strength of the PHNC lies in its close working relationship with the field missions.

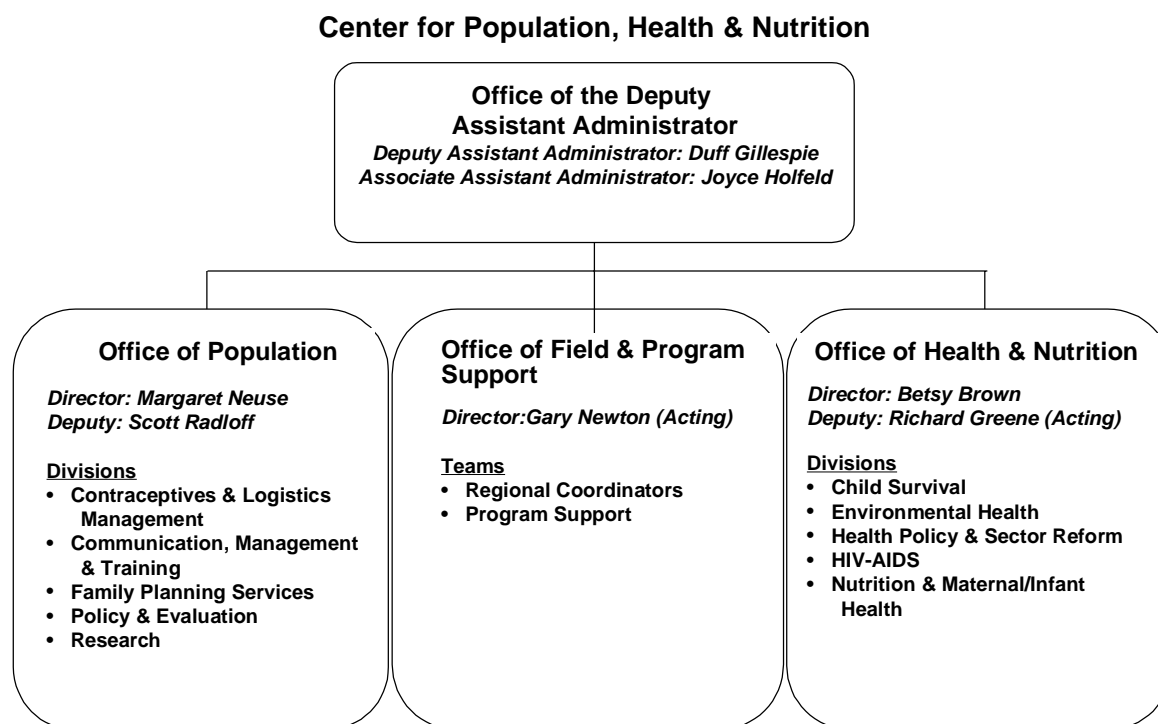
Technical Support to the Field: As home to the PHN technical staff, the PHNC provides support to missions and addresses a wide range of field needs, enabling missions to benefit from USAID's worldwide experience and knowledge. The PHNC has developed projects that provide access to state-of-the-art technical assistance through a network of Cooperating Agencies (CAs).

Research and Evaluation: In this area, a future-focused approach is essential. The results of USAID-supported biomedical, operations, demographic, evaluation, applied, and social science research form the foundation of future services and programs worldwide. The Congress, the general public, and other international agencies and partners rely heavily on these data and analyses.

The PHNC's global leadership, technical support to the field, and research and evaluation functions are closely linked. Needs are identified in the field, research is undertaken to determine how best to respond to those needs, and on-the-ground experience feeds back into program development and new initiatives.

Structure of the PHNC

The PHNC is composed of **the Office of Population, the Office of Health and Nutrition, and the Office of Field and Program Support**, with complementary objectives and activities.. Each office contributes to the Agency goal of stabilizing world population and protecting human health. The divisions and their functions are described below.



The Office of Population (POP):

Contraceptives and Logistics Management Division (CLM): Provides a centralized system for contraceptive procurement, maintains a database on commodity assistance, and supports a program for contraceptive logistics management.

Communication, Management, and Training Division (CMT): Increases the awareness, acceptability, and use of family planning methods and expands and strengthens the managerial and technical skills of family planning and health personnel.

Family Planning Services Division (FPSD): Increases availability and quality of family planning and related reproductive health services through strengthening government programs, local private voluntary organizations, for-profit organizations, and commercial channels.

Policy & Evaluation Division (P&E): Collects and analyzes family planning and other reproductive health information; improves the policy environment for family planning and reproductive health services; and strengthens methodologies for evaluation of family planning and reproductive health programs.

Research Division (R): Supports biomedical research to increase understanding of contraceptive methods and to develop new fertility regulation technologies and conducts operations research to improve the delivery of family planning and reproductive health services.

The Office of Health and Nutrition (HN):

Child Survival Division (CS): Provides technical guidance and assists in strategy development and program implementation in child survival, including interventions aimed at child morbidity and infant and child nutrition.

Environmental Health Division (EH): Assists in the design, implementation, research and evaluation of environmental health activities and issues, and infectious disease programs.

Health Policy and Sector Reform Division (HPSR): Assists in the design, implementation, research and evaluation of health and nutrition policy reform, management and financing issues, including health care financing, quality assurance, pharmaceuticals, private sector and data activities.

HIV/AIDS Division (HIV-AIDS): Provides technical guidance and assists in strategy development, program design and implementation of HIV/AIDS prevention and mitigation activities worldwide.

Nutrition and Maternal/Infant Health Division (NMH): Provides technical guidance and assists in strategy development and program implementation in maternal and neonatal survival, food and nutrition, and young child breastfeeding.

The Office of Field and Program Support (OFPS):

This office is a service-oriented unit, focusing on translating state-of-the-art technical direction into appropriate field strategies and programs. OFPS ensures that programs achieve results both globally and at the country level. OFPS is organized into two teams, as follows:

Regional Coordinators: Coordinate the country teams, which consist of a country coordinator and resource persons from PHNC, as well as representatives from the Regional Bureaus. The country teams serve as the PHN liaison for the field missions. The Office also provides leadership for the Center in donor coordination, strategic planning and performance monitoring.

Program Support: Carries out programming and budgeting for the Center, personnel management, donor coordination, and other tasks related to the global management of PHN resources.

Part II

Project Directory

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Central Contraceptive Procurement

Cooperating Agency	N/A
Project Number	936-3057
Contract Number	Various
Duration	1990-2008
Geographic Scope	Worldwide

Purpose: To provide an efficient mechanism for consolidated USAID purchases of contraceptives based on the transfer of all funds from all USAID accounts that support contraceptive procurement to a single central procurement account at the beginning of each operational year.

Description: This project was established in FY 1990 to provide an efficient central contraceptive procurement mechanism for all USAID offices whose programs require contraceptive supplies. Funds are transferred annually to this project through field support and OYB transfers from each of the USAID accounts that support contraceptive procurement. G/PHN/POP directs the use of these funds through a series of procurement contracts to provide the contraceptive supplies required by USAID programs worldwide. This project consolidates the procurement actions, but leaves responsibility for the estimation of contraceptive needs in the USAID offices that support family planning delivery systems. The central procurement system undertakes the purchase of several differently-packaged condoms; oral contraceptive pills; vaginal foaming tablets; NORPLANT® implants; the Copper T-380A IUD; female condoms; and Depo-Provera. For details on formulation, brands, prices, contract terms, and ordering procedures, please refer to G/PHN/POP guidance for estimating contraceptive procurement needs. All shipping and warehousing of USAID-supplied contraceptives is provided by Panalpina, Inc.

The Central Contraceptive Procurement (CCP) project also provides a mechanism for independent testing of the contraceptives purchased by USAID to monitor quality assurance of contraceptives donated to USAID programs. The contraceptive quality assurance component of CCP has two features: (1) pre-acceptance surveillance and testing of contraceptives purchased by USAID to ensure that the product complies with the contract specifications, and (2) to test contraceptives already in the field in response to complaints and/or concerns about the product quality. The quality assurance testing is implemented by Family Health International as part of the Contraceptive Technology Research Project (See the Research section of this guide).

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Contractors may change annually because of competitive contract procedures. Fiscal year 2001 contractors include:
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 Leiras Oy;
 Ortho-McNeil Pharmaceutical;
 Wyeth-Ayerst International Ltd.;
 Pharmacia;
 Female Health Company;
 Alatech Healthcare Products;
 Panalpina

Please see the CA Contacts section of this guide for contact information.



DELIVER

Cooperating Agency	John Snow, Inc
Project Number	936-3089.01
Contract Number	HRN-C-00-00-00010-00
Duration	5 years
Geographic Scope	Worldwide

Purpose: DELIVER is a five year, worldwide technical support contract focused on providing health commodity logistics support to the PHN sector. DELIVER provides commodity management support to the Agency's family planning, HIV/AIDS, child survival and other health initiatives. The efforts are intended to improve the availability of health commodities including contraceptives, condoms, and other essential drugs at service delivery points (SDPs).

Description: Work within the contract has the following four characteristics:

- 1) DELIVER provides to the field, basic family planning and health logistics assistance focused on the delivery of commodities to SDPs. This assistance includes capacity-building in forecasting, procurement, distribution, management, information systems, and other functions.
- 2) DELIVER offers a broad capacity for technical assistance to improve distribution of contraceptives and other health commodities in integrated health commodity environments, decentralized systems, and systems in which private sector providers have a significant role.
- 3) DELIVER provides support for resource mobilization and the coordination of available resources for commodities and logistics at the donor, lender, and country levels. In particular, this assistance is intended to address issues of contraceptive security.
- 4) DELIVER offers Missions assistance in preparing annual contraceptive procurement tables (CPTs) and supports USAID/W management of the Central Contraceptive Procurement (CCP) project as well as CCP's management information system and database.

DELIVER can accept any funding type appropriate for the work requested.

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Family Planning Logistics Management (FPLM/CDC)

Cooperating Agency	Centers for Disease Control and Prevention (CDC)
Project Number	936-3038.01
Agreement Number	HRN-P-00-97-00014-00
Duration	10/97-9/02
Geographic Scope	Worldwide

Purpose: To improve the management and operation of family planning (FP) programs in developing countries through the use of more effective logistics systems, the collection and analysis of demographic and program evaluation data, and the use of targeted epidemiological activities.

Description: This multi-year PASA with the Division of Reproductive Health at the Centers for Disease Control and Prevention (DRH/CDC) provides technical assistance to developing country family planning organizations in five areas: 1) logistics management - in collaboration with John Snow, Inc. (JSI), to improve the ability of local FP organizations to more effectively and efficiently manage their contraceptive supplies; 2) reproductive health surveys - to assist FP organizations in determining the patterns of contraceptive knowledge and use; 3) reproductive health epidemiology - to provide technical assistance and training on epidemiological issues related to contraceptive safety and reproductive health in collaboration with MEASURE partners; 4) adolescent reproductive health - to collaborate with USAID and service delivery cooperating agencies on adolescent reproductive health; 5) reproductive health for refugees - providing technical assistance to relief organizations and documenting the "Burden of Disease" of reproductive health within complex humanitarian emergency and refugee settings.

With its work in reproductive health surveys, the CDC PASA represents the fifth component of the MEASURE Results Package. For reference to a complete description of the CDC component of MEASURE, see the MEASURE CDC project description in the Policy & Evaluation section of this guide.

Special Requirements: This agreement will not accept FY 2002 Field support. Missions interested in accessing the services of CDC for these activities should put field support into the new agreement under Measure, which will begin in September 2002. For a description of the new agreement. Please see the MEASURE CDC/DRH project description in the Policy & Evaluation section of this guide.

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Improving the Performance of Primary Providers in Reproductive Health (PRIME II)

Cooperating Agency	INTRAH, University of North Carolina
Project Number	936-3093.01
Agreement Number	HRN-A-00-99-00022-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To improve the performance of primary providers in family planning and reproductive health, including safe motherhood and STD/HIV/AIDS prevention. PRIME II's focus is to develop a sustainable system for training and education that supports on-the-job performance.

Description: PRIME II is a worldwide project focusing on improving the performance of frontline providers in family planning, reproductive health, maternal and child health and HIV/AIDS using both training and non-training interventions (supervision, deployment, organizational development, etc.). Primary providers include nurses, midwives, health attendants, traditional birth attendants, community-based workers and, in some countries, primary care physicians. The objective of PRIME II is to improve on-the-job performance of primary providers and develop a sustainable system (training, education, and service delivery) for improved performance.

PRIME II has regional offices in West Africa (Senegal), East Africa (Kenya), Asia/Near East (India) and Latin America/Caribbean (Dominican Republic).

Subcontractors: Abt Associates Inc.; AVSC International; International Projects Assistance Services (IPAS); Program for Appropriate Technology in Health (PATH); Training Resources Group (TRG); and implementing institutions include the American College of Nurse-Midwives (ACNM) and Save the Children.

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Information, Education, and Communication Support Project (IEC)

Cooperating Agency	Johns Hopkins University (JHU/CCP)
Project Number	936-3052.02
Agreement Number	CCP-A-00-96-90001-00
Duration	11/95-3/03
Geographic Scope	Worldwide

Purpose: To enhance reproductive health, support an increased demand for a wide range of family planning and other family health services including HIV/AIDS, maximize access to quality services, provide new opportunities for women and promote informed choice through a broad range of information, communication, education and behavior change programs.

Description: The Information, Education and Communication (IEC) Project, also known as Population Communication Services (PCS), provides technical expertise and financial support for strategic communication interventions in developing countries in the following areas: a) program analysis; b) strategy development; c) materials design, pretesting and production; d) management, monitoring and implementation; e) impact evaluation; and f) capacity building and sustainability. The project emphasizes the synergistic use of mass media, interpersonal communication/counseling and community mobilization in its strategic approach to communication and behavior change. Specifically, the project offers assistance in the following areas: 1) assessing communication needs; 2) designing communication strategies; 3) building capacity and sustainability in IEC; 4) using mass media, community mobilization, interpersonal communication/outreach and counseling effectively; 5) developing demand-side strategies for quality of care; 6) developing and pretesting materials to a variety of audience segments; 7) using the entertainment-education approach, including distance learning, strategic positioning and marketing of services; 8) IEC training and curriculum development; and 9) evaluating communication process and impact.

Subcontractors: Academy for Educational Development (AED); The Centre for Development and Population Activities (CEDPA); Prospect Associates; and Save the Children.

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Management and Leadership Development (M&L)

Cooperating Agency	Management Sciences for Health
Project Number	936-3099
Agreement Number	HRN-A-00-00-00014-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: To improve leadership, management, and sustainability of accessible, quality services and programs in the areas of reproductive health, HIV/AIDS, infectious disease, and maternal and child health by strengthening management systems and increasing leadership capacity; improving the performance of leaders and managers; planning and managing human resources, and building capacity to anticipate and respond effectively to changing external environments.

Description: M&L is designed to reach beyond previous projects to support the development of high-performing organizations that provide effective reproductive and other health services (e.g., HIV/AIDS, TB, MCH) through:

- Strengthening leadership capacity and building diversity in leadership;
- Improving management systems for key institutions;
- Conducting human resource management (HRM) assessments and providing technical assistance in HRM;
- Enabling leaders and managers to work effectively in the context of health sector reform and decentralization;
- Applying a Performance Improvement approach to achieve results and help managers and leaders understand why training alone is often not the answer for complex problems;
- Demonstrating which management and leadership interventions are most effective in improving the delivery of services;
- Developing the capacity of local or regional organizations to provide south-to-south technical assistance; and
- Communicating advances in management and leadership to the international health field.

M&L provides technical assistance and support to both governmental and non-governmental organizations worldwide. Through partnerships with south-to-south institutions, USAID CAs, private sector initiatives, foundations and donors, M&L demonstrates the most effective and comprehensive ways organizations and individuals can use tools and approaches to build effective systems –thus working toward sustainability. While helping institutions meet client needs and improve the performance of their programs, M&L also increases the body of knowledge of management and leadership and demonstrates why they are critical to improving health services.

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Population Fellows Program (Michigan Fellows)

Cooperating Agency	University of Michigan
Project Number	936-3093.02
Agreement Number	HRN-A-00-00-00001-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To provide 1) international family planning and reproductive health programs in developing countries with professional technical expertise in family planning, reproductive health, and related areas, such as environment; 2) international training for recent master-degree graduates or mid-career professionals through fellowships both in the U.S. and overseas; and 3) a forum for policymakers to discuss the links between population growth, environmental degradation and international security conflicts.

Description: This project provides programs in the private and the public sectors with the skills of fellows who are recent master-degree graduates or mid-career professionals in family planning/reproductive health and development-related fields. It simultaneously provides entry level professionals with valuable field experience and training. The technical assistance and training provided covers: data collection and analysis; policy formulation and implementation; communication and education; training; management; service delivery; and program evaluation. Fellows are selected competitively on the basis of their academic and professional experience, and according to the skills required by the host institution. Fellows are placed in developing country governmental and non-governmental agencies and universities, and in national and international organizations which support population and related activities in both developing countries. The U.S. Fellowship term is 24 months.

Population-Environment Fellows: The Population-Environment Fellows Program has the same objectives as the Population Fellows Program. Population-Environment Fellows work primarily in the following areas: integrated community-based development programs; linked population-environment service delivery; buffer zone management; policy analysis and research of population-environment dynamics; and participatory rural analysis.

Minority Serving Institutions Initiative: This initiative works with students and faculty from Historically Black Colleges and Universities, Hispanic-Serving Institutions, and Tribal Colleges and Universities to increase the number of students from these institutions who pursue careers in international family planning and reproductive health. The centerpiece activity of the initiative is an internship program designed to prepare candidates for fellowships.

Environmental Change and Security Project (ECSP): This project is administered by the Smithsonian Institution's Woodrow Wilson Center. Through meetings, publications, and the activities of the Director, the ECSP explores a wide range of academic and policy-related topics involving the population-environment-security nexus. Through these activities, ECSP gains the attention and participation of policymakers, resulting in the consideration of population-environment-security issues in the broader context of U.S. foreign policy.

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Population Information Program (PIP)

Cooperating Agency	Johns Hopkins University (JHU)
Project Number	936-3052
Agreement Number	HRN-A-00-97-00009-00
Duration	4/97-3/03
Geographic Scope	Worldwide

Purpose: To improve the quality of family planning and reproductive health services in developing countries by providing a variety of information services.

Description: The Population Information Program (PIP) supplies information to family planning, reproductive health, health and population professionals and policymakers in the developing world. These services provide family planning professionals, policymakers, researchers, and others with up-to-date and comprehensive analytical reviews, responses to specific inquiries, subject bibliographies, sample communication materials, and other materials and resources to meet a wide variety of needs for scientific, technical, and programmatic information, guidance, and decision-making. These services help to improve program planning and policy decision-making by providing developing country professionals access to lessons learned in programs worldwide; supplying information about the latest developments in relevant health sciences and advances in family planning technology and practice; and drawing attention to new policy initiatives.

Some of these services include **Population Reports**, *the Essentials of Contraceptive Technology* handbook, POPLINE, and the Media/Materials Clearinghouse. The authoritative review, *Population Reports*, covers important issues in population, family planning, and related health matters, such as maternal health, FGC, and violence against women. The journal is published four times a year in English, French, and Spanish with selected issues in other languages. The computerized bibliographical database, POPLINE, available on CD-ROM and online at www.popline.org, is the world's largest database on population, family planning, and related reproductive health literature. The Media/Materials Clearinghouse provides sample communication materials on family planning, reproductive health, and related topics, ranging from flipcharts to videos, from a collection of 50,000 materials from around the world, along with information on materials development and new communication materials. The peer-reviewed journal *International Family Planning Perspectives*, published by the Alan Guttmacher Institute, receives partial support from PIP.

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Population Leaders Program (PLPII)

Cooperating Agency	Public Health Institute
Project Number	936-3070
Agreement Number	HRN-A-00-99-00012-00
Duration	7/99-7/04
Geographic Scope	Worldwide

Purpose: To improve management and leadership of selected family planning/reproductive health programs by: 1) increasing technical capacity within the PHN sector through the placement and support of Fellowships; 2) improving leadership and management practices of PHN professionals through non-training and training interventions; 3) improving work processes that will target individuals and teams.

Description: PLPII increases technical capacity by recruiting, placing, and supporting the professional development of 40 mid- to senior-level fellows in two-year assignments in the PHN Center, Regional Bureaus, Missions, and Regional Offices. PLP fellows advise program teams, provide technical assistance to funded programs, carry out evaluations, promote collaboration among USAID partners, conduct innovative research, and spearhead priority PHN initiatives, while completing a customized professional development plan. Fellowships are guided by a scope of work developed in collaboration with the host organization. PLPII also contributes to technical capacity development by supporting State-of-the-Art (SOTA) Technical workshops and technical updates that promote knowledge acquisition and exchange. Key Sessions are packaged in CD-ROM or web-based formats for dissemination to the field.

PLPII improves leadership and management practices of PHN professionals through training in core leadership disciplines, coaching, mentoring, and team building. Activities are designed to focus on skills development that will contribute to the performance of selected individuals and teams overall.

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Training in Reproductive Health III

Cooperating Agency	JHPIEGO Corporation
Project Number	936-3069.01
Agreement Number	HRN-A-00-98-00041-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: The purpose of the TRH project is to strengthen the provision of high quality services through improving the performance of RH professionals and providers. The new Training in Reproductive Health (TRH) III Project establishes integrated training systems for family planning and reproductive health by developing, disseminating and implementing national policy and service delivery guidelines; developing a network of trainers to provide expert technical and training support in the pre-service and in-service arenas; and helping ensure management support for the entire training system.

Description: The TRH Project builds on JHPIEGO's expertise in developing cost-effective learning approaches for low-resource settings, including self-paced learning through structured on-the-job training, computer-based training and distance learning, using emerging information technologies. These approaches are designed to meet a broad range of needs- that include support for the management of services (supervision and performance improvement); support for developing the technical skills of clinical trainers as well as support for strengthening the infrastructure that will sustain the systematic transfer of knowledge and skills whether within service delivery entities (NGO's, MOH) or through existing learning institutions (universities and technical schools).

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ADVANCE Africa

Cooperating Agency	Consortium of six agencies; lead - MSH
Project Number	936-3101.01
Contract Number	HRN-A-00-00-00004-00
Duration	10/00-9/05
Geographic Scope	Africa

Purpose: The Family Planning/Reproductive Health (FP/RH) Services Results Package is a five-year Africa regional competitive award. It is designed to increase the use of sustainable, quality family planning and reproductive health services and healthy practices through clinical and non-clinical programs, with linkages to other sectors, as appropriate.

Description: This FP/RH Services agreement is expected to scale-up family planning programs through the application of proven approaches and state-of-the-art (SOTA) practices. Priorities include improving quality and access in clinical and non-clinical programs, particularly in the context of high HIV/AIDS prevalence. Possible areas of intervention include FP/RH education, adolescents, counseling and referral through non-clinical channels, women's and community empowerment and establishing public-private and NGO-private commercial partnerships as well as more traditional public sector approaches. The effectiveness of such activities will be measured, in part, by:

- Increased access to and improved quality of FP/RH clinical and non-clinical programs;
- Increased capacity for informed FP/RH decision-making by clients and communities;
- Increased capacity of the public and private sectors to sustain quality FP/RH service delivery programs.

Under this agreement, it is expected that other donor funds will be leveraged to support approximately twenty-five percent of program costs.

The Advance Africa project is composed of a consortium of six members, Management Sciences for Health (MSH), Academy for Education Development (AED), Family Health International (FHI), The Centre for African Family Studies (CAFS), the Forum for African Women Educationalists (FAWE), and Deloitte Touche Tohmatsu (DTT).

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CARE RH Trust Fund

Cooperating Agency	Cooperative for Assistance and Relief Everywhere (CARE)
Project Number	936-3084
Grant Number	HRN-A-00-99-00009-00
Duration	9/99-9/02 *
Geographic Scope	Worldwide

Purpose: To serve as an endowment for providing sustainable financing for CARE's global family planning/reproductive health/child survival/HIV program.

Description: USAID is faced with the challenge of mobilizing resources for family planning and reproductive health and must find ways to multiply its limited population assistance funds if it is to continue to play its role of global leadership and help respond to an ever-increasing demand for FP/RH services. Because of CARE's worldwide reach and demonstrated capacity to successfully deliver services and leverage previous USAID funds, the Reproductive Health (RH) Trust Fund is an ideal approach for helping USAID achieve its FP/RH goals.

The Trust Fund is designed to expand and sustain CARE's global RH portfolio by:

- ensuring access to quality family planning, maternal health, child survival and STD/HIV services among under-served populations;
- empowering targeted communities to be effective, informed, organized consumers of and advocates for family planning, maternal health, child survival and STD/HIV services; and
- increasing the capacity of national institutions (public, non-governmental, community-based and private, for-profit) to deliver appropriate, high quality, sustainable family planning, maternal health, child survival and STD/HIV services.

The Trust Fund's principal is financed through a combination of USAID funds and CARE match funds. In addition, as a cooperative agreement, the Trust Fund is designed to receive field support from USAID Missions and Regional Bureaus, as well as contributions from other donors (multilateral, bilateral, foundations, private, etc.). This mechanism will allow Missions to allocate funds for mid- and long-term RH planning and to contract technical assistance from CARE. Missions that are phasing out can also use the Trust Fund to keep programs operational after Mission close-out.

* Cooperative Agreement ends 9/02; activities ongoing.

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Commercial Market Strategies (CMS)

Cooperating Agency	Deloitte Touche Tohmatsu
Project Number	936-3085
Contract Number	HRN-C-00-98-00039-00
Duration	10/98-9/03
Geographic Scope	Worldwide

Purpose: To increase the use of quality family planning and other health products and services through private sector partners and commercial strategies.

Description: The Commercial Market Strategies (CMS) contract will achieve three intermediate results: 1) increased demand from the private sector, 2) increased supply through commercial approaches, and 3) improved environment for sustainable delivery of family planning and other health products and services through the private sector. The project works to expand quality reproductive health care delivery by the private and commercial sector, through innovative health financing programs, social marketing programs, provider networks, partnerships with the commercial sector, corporate social responsibility initiatives and policy change. CMS provides technical assistance to help service delivery NGOs achieve financial sustainability, and is mandated to help move subsidized social marketing programs toward fully commercial partnerships with pharmaceutical companies. CMS also carries out a core research agenda, and through its communications program, disseminates lessons learned about the commercial sector's contribution and potential.

Through the Summa Foundation, an independent foundation managed under CMS, financing and technical assistance are available to NGO and commercial sector clients involved in FP/RH or MCH product or service provision. Summa's micro-credit program also capitalizes loan funds for service providers through local micro-credit organizations.

By the end of the contract, CMS will have: 1) increased the role of the private and commercial sectors in providing family planning and other health products and services; 2) covered under-served, rural and urban areas and populations; 3) improved governments' abilities to rationalize resources and collaborate with the commercial sector; 4) improved knowledge on the use of the private sector to expand health coverage; and, 5) leveraged up to \$50 million from partnerships with the private and commercial sectors.

Implementing Partners: Abt Associates, Inc.; Meridian Development Foundation; and Population Services International (PSI).

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Catalyst Consortium (Family Planning/Reproductive Health Services)

Cooperating Agency	Consortium of five agencies: lead - Pathfinder International (lead); Academy for Educational Development (AED); Centre for Development and Population Activities (CEDPA); Meridian Group International, Inc; PROFAMILIA/Colombia
Project Number	936-3101.02
Contract Number	HRN-A-00-00-00003-00
Duration	10/00-9/05
Geographic Scope	ANE, E&E, LAC

Purpose: The Family Planning/Reproductive Health (FP/RH) Services Results Package is a five-year multi-regional competitive award, encompassing Asia and the Near East; Latin America and the Caribbean; and Eastern Europe and Eurasia. It is designed to increase the use of sustainable, quality family planning and reproductive health services and healthy practices through clinical and non-clinical programs, with linkages to other sectors, as appropriate.

Description: CATALYST is designed to disseminate and help scale-up proven models of effective FP/RH service delivery. As a multi-disciplinary consortium, CATALYST provides technical assistance to strengthen underutilized channels and intersectoral partnerships for services and information. Possible areas of intervention include: FP/RH education and outreach, adolescent programs, counseling and referral through non-clinical channels, women's and community empowerment and strengthening public-private and NGO-private commercial partnerships. Anticipated results are as follows:

- Increased access to and improved quality of FP/RH clinical and non-clinical programs;
- Increased capacity for informed FP/RH decision-making by clients and communities;
- Increased capacity of the public and private sectors to sustain quality FP/RH service delivery programs.
- Scaled-up and improved FP/RH service delivery through technical collaboration with other agency/donor foundation programs.

Consortium partners and their key areas of expertise are: Academy for Educational Development (AED) (behavior change, rural outreach, monitoring and evaluation); Centre for Development and Population Activities (CEDPA) (women's empowerment, male involvement, community mobilization, FP/RH links to non-health programs); Meridian Group International, Inc. (commercial sector partnerships, commercial-NGO linkages); Pathfinder International (family planning/reproductive health service delivery, post-abortion care, adolescent programs, coordination with other donors); and PROFAMILIA/Colombia (south-to-south technical assistance, adolescent services and information, NGO financial planning/sustainability).

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IPPF/WHR Endowment

Cooperating Agency	International Planned Parenthood Federation/ Western Hemisphere Region
Project Number	N/A
Grant Number	N/A
Duration	N/A
Geographic Scope	Western Hemisphere Region

G/PHN/POP developed two endowments under The IPPF/WHR Transition Project (1992-1997) to support the Colombia IPPF affiliate, PROFAMILIA, and to support sustainability efforts of the affiliates in the Western Hemisphere Region.

PROFAMILIA Endowment:

Purpose: To maintain reproductive health service facilities and respond to health needs of displaced populations and other emergencies. The Colombia IPPF Affiliate, PROFAMILIA, received a six million dollar endowment upon phase-out of USAID assistance to the country.

Description: The endowment allows PROFAMILIA to draw on income generated to fund hard-to-reach populations and to meet emergencies. The endowment is managed by Brown Brothers and Harriman in New York and has grown to 10 million dollars by the end of 1998.

Endowment Fund for Sustainability (EFS):

Purpose: To create a revolving loan fund to support income generating activities of the IPPF/WHR affiliates in Latin America and the Caribbean.

Description: The endowment provides loans of up to \$300,000 per affiliate for activities that increase the organizations' financial sustainability. Initially available to regional IPPF affiliates, this mechanism may be extended to other non-governmental organizations in LAC. IPPF/WHR received four million dollars from USAID and is contributing another one million dollars over a five-year period. This endowment is managed by U.S. Trust of New York.

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LINKAGES: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-3082.01
Agreement Number	HRN-A-00-97-00007-00
Duration	11/96-10/06
Geographic Scope	Worldwide

Purpose: LINKAGES is the principal USAID initiative for improving breastfeeding (BF), Lactational Amenorrhea Method (LAM), and related maternal and child dietary practices. The focus of the program is on mainstreaming BF, LAM, and related complementary feeding and maternal dietary practices into ongoing Child Survival (CS), Maternal and Child Health (MCH), Family Planning (FP) and Emergency Relief Programs. The program also addresses Mother-to-Child Transmission (MTCT) issues in countries with high HIV prevalence, by providing accurate technical information and counseling, to enable women to make informed decisions about infant feeding.

Description: Principal activities include: 1) technical support to help CAs, PVOs, public sector programs, and other donors improve their BF, LAM, and related infant feeding and maternal nutrition activities; and focusing on mainstreaming these activities at all levels of service delivery, IEC, curricula, and monitoring and evaluation tools in MCH and FP programming; 2) development and testing of community-based strategies, peer counseling and other models, while linking to ongoing efforts in Baby-Friendly Hospital Initiatives (BFHI) and Integrated Management of Childhood Illness (IMCI); 3) interventions in cooperation with large PVO networks and scaling up proven strategies and technologies; 4) program-driven research such as operations research, cost-effectiveness, and country program assessments, with in-depth cross-site analysis and smaller focused studies of intervention components.

Partners/Collaborators: La Leche League International; Cooperative for Assistance and Relief Everywhere (CARE); Catholic Relief Services (CRS); and World Vision International (WVI).

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Program for Voluntary Surgical Contraception and Related Services

Cooperating Agency	AVSC International
Project Number	936-3068
Agreement Number	HRN-A-00-98-00042-00
Duration	9/98-8/03
Geographic Scope	Worldwide

Purpose: To increase use of sustainable, client-oriented services in hospital and clinic settings through technical and programmatic assistance in voluntary sterilization and other long-term methods, postabortion care, integration of STI/GIV prevention into family planning programs, and in practical quality improvement approaches that address client rights and provider needs

Description: AVSC works around the world to make safe and voluntary surgical contraception a known and accessible choice, among other family planning choices, for both women and men. AVSC also works around the world to make postabortion care a known and accessible service for women suffering from the complications of miscarriage and unsafe abortion. AVSC's work emphasizes high-quality, client-centered service delivery of female sterilization, vasectomy, other family planning methods, and related services such as postabortion care and STI/HIV prevention. AVSC's technical assistance and training programs focus on counseling and informed choice, medical safety, low-tech infection prevention practices, and quality in service delivery from the perspective of the client. AVSC's field and technical staff work in partnership with the country counterparts, USAID missions, other major donors, and cooperating agencies to establish, expand, and improve sustainable clinical contraception and related services.

AVSC provides technical and other assistance to countries and donors in the following areas: conducting needs assessments and planning for clinical contraception service delivery; managing effective client-centered service delivery systems; conducting service-based training; developing service guidelines and quality assurance systems; establishing client counseling and information and education services; introducing contraceptive technologies; integrating STI/HIV prevention into family planning programs; determining medical equipment/supply needs; providing training in postabortion care; doing service-based programmatic research; and evaluating the impact of programs and activities. More recently, AVSC has assisted Missions to assess the risk of violations to the Tiahrt Amendment requirement of informed choice and recommended specific actions to strengthen the overall level of informed choice within a country.

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PVO/NGO Networks CARE MoRR

Cooperating Agency	Cooperative for Assistance and Relief Everywhere (CARE)
Project Number	936-3084.02
Agreement Number	HRN-A-00-98-00023-00
Duration	7/98-6/03
Geographic Scope	Worldwide

Purpose: To contribute to household and health security by empowering people to achieve their reproductive intentions and reproductive health.

Description: CARE-MoRR (Management of Reproductive Risk) is designed to empower communities to be organized, effective consumers of and advocates for family planning/reproductive health/child survival/HIV-AIDS services; to increase the capacity of a wide range of national institutions (public sector, NGOs, community-based organizations, and private, for-profit) and small and moderate international PVOs to deliver appropriate, high quality, family planning and reproductive health services; and to significantly increase the sustainability of CARE's family planning and reproductive health program.

To achieve these ends, CARE will build service delivery networks. Based on a careful analysis of reproductive health needs and the strengths and weaknesses of local institutions, CARE will construct a service delivery network of private voluntary organizations, non-governmental organizations, public sector providers, community-based organizations and for-profit providers. CARE will work closely with the network to strengthen their capacity to deliver an integrated package of family planning and other reproductive health services including maternal health, newborn care, and STD/HIV prevention activities.

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PVO/NGO Networks ENABLE

Cooperating Agency	The Centre for Development and Population Activities (CEDPA)
Project Number	936-3084.03
Agreement Number	HRN-A-00-98-00009-00
Duration	2/98-2/03
Geographic Scope	Worldwide

Purpose: To strengthen women's capabilities for informed and autonomous decision-making to prevent unintended pregnancies and improve reproductive health.

Description: CEDPA's mission is to empower women at all levels of society to be full partners in development. The ENABLE project works with approximately 50 NGO partners to expand quality services, create behavior change, and increase women's reproductive health decision-making ability. In order to achieve its goal, the project addresses the underlying contextual factors which are barriers to a woman's control over her reproductive life by adopting a comprehensive, two-pronged approach:

- Expanding quality, gender-sensitive, sustainable FP/RH/CS/HIV services by increasing the capacity of NGOs; and
- Creating change in demand factors by promoting an enabling environment for women's informed and autonomous decision-making through NGOs and networks.

ENABLE will work with NGOs that have the capacity to expand coverage in multiple sites and regions. These NGOs will link family planning/reproductive health and women's empowerment through literacy, economic development, and democracy and governance activities. ENABLE NGO partners will leverage funds from other sources to directly support programs in these other sectors.

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PVO/NGO Networks

NGO Networks for Health

Cooperating Agency	Save the Children
Project Number	936-3084.01
Agreement Number	HRN-A-00-98-00011-00
Duration	3/98-3/03
Geographic Scope	Worldwide

Purpose: To increase the use of family planning/reproductive health/child survival/HIV services through enhanced capacities of PVO/NGO networks.

Description: NGO Networks for Health (*Networks*), a coalition of four private voluntary organizations and one technical agency, is combining efforts to build and strengthen the capacities of PVO/NGO networks in developing countries to provide family planning, reproductive health, child survival, maternal health and STI/HIV services. *Networks'* efforts will focus on expanding access to, and improving the quality of, family planning as part of community-based efforts to improve maternal and child health, and preventing the transmission of HIV/AIDS and other sexually transmitted infections. The project will work in six focus countries, with the potential to expand to additional countries through the partner organizations' existing programs.

Partners: Led by Save the Children, the group includes the Cooperative for Assistance and Relief Everywhere (CARE); the Adventist Development and Relief Agency (ADRA); Childreach/Plan International; and the Program for Appropriate Technology in Health (PATH)

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YouthNet

Cooperating Agency	Family Health International
Project Number	936-3073
Agreement Number	GPH-A-00-01-00013-00
Duration	10/01 – 9/06
Geographic Scope	Worldwide

Purpose: to improve the reproductive health (RH) and HIV/AIDS prevention behaviors of young people aged 10-24.

Description: YOUTHNET is a new five-year cooperative agreement within the Bureau of Global Health (BGH) managed jointly by the Office of Population and the Office of HIV/AIDS. This multi-sector initiative offers a new USAID mechanism to expand and strengthen youth RH and HIV/STI prevention efforts by applying a specialized youth lens and state-of-the-art knowledge in this field. It recognizes that innovative communication and outreach approaches, which go beyond the health sector, are necessary to address young people's particular needs.

YOUTHNET seeks to (i) provide global technical leadership through research, information dissemination, and capacity building to advance the field of youth RH and HIV/STI prevention; (ii) partner with USAID missions in about five focus countries to scale-up youth activities for national impact on key youth behaviors; and (iii) provide short-term technical assistance in other countries. Key results anticipated for YOUTHNET include:

- an improved policy environment and increased community support for youth reproductive health and HIV/STI prevention;
- improved knowledge, attitudes and skills related to healthy reproductive practices, including strategies to help young people delay sexual activity; and
- expanded access for youth to quality reproductive health products and services, especially condoms.

YOUTHNET has an innovative and comprehensive design to meet the unique, complex and often wide-ranging RH needs of young people as well as those of parents and other involved adults. It recognizes the need to segment all interventions and messages for youth based on their age, sex, life stage, marital status, culture, and geographic location, among other factors. YOUTHNET will take an assets-based approach, emphasizing the energy and resilience of young people and their capacity for positive behavior change, and will seek to involve youth in all aspects of the program. In addition, YOUTHNET proposes to use an innovative social franchising approach to expand networks of youth-friendly services and programs, especially through the private sector.

Partners: CARE USA, Deloitte Touche Tohmatsu Emerging Markets, Ltd. (DTT), Margaret Sanger Center International (MSCI), Research Triangle. YOUTHNET will also involve global youth networks, such as the World Association of Girls Guides and Girl Scouts, the World Organization of the Scout Movement, and the Young Women's Christian Association in addition to global media, including Music Television (MTV) Networks International and SATELLIFE.

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Expert Studies of Population Issues

Cooperating Agency	National Academy of Sciences (NAS)
Project Number	936-3078.03
Agreement Number	HRN-A-00-00-00012-00
Duration	10/00-9/05
Geographic Scope	Worldwide

Purpose: To support the National Academy of Sciences' Committee on Population in conducting research on population issues of special interest to the international population community.

Description: The Committee organizes panel studies, conferences, workshops, and meetings designed to synthesize and elicit research on macro issues in population, reproductive health, and family planning that will confront USAID and its development partners in the next decades.

The Committee's agenda is formulated on a continuing basis at its meetings, and between meetings in staff discussions with sponsoring agencies. Current topics include urban population dynamics and transitions to adulthood, including sexuality and reproductive health, union and family formation, education, and work in developing countries.

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MEASURE: BUCEN Survey and Census Information, Leadership, and Self-Sufficiency (BUCEN-SCILS)

Cooperating Agency	U.S. Bureau of the Census (BUCEN)
Project Number	936-3083.04
Agreement Number	HRN-P-00-97-00016-00
Duration	9/97-3/03
Geographic Scope	limited to select countries

Purpose: The MEASURE Program is a coordinated effort to improve the collection, analysis and presentation of data for use in planning, policymaking, managing, monitoring and evaluating population health and nutrition programs. BUCEN-SCILS seeks to strengthen the capability of statistical offices in developing countries to collect, analyze, disseminate and use data to increase understanding of population structure and demographic trends and their implications for development planning and policy making.

Description: Now in its final year, this PASA with BUCEN supports on-going country-specific technical assistance and training for the implementation of censuses and other surveys in a number of countries, including Macedonia, Armenia, Senegal and South Africa. Technical assistance activities include: technical consultations and workshops for host country statistical agencies and USAID field missions, and training in census management procedures, data collection and processing, demographic data analysis, dissemination, and use of census data.

Special Information: In the summer of 2002 this PASA will be replaced by a new PASA with BUCEN that supports in-country technical assistance, training as well as centrally-coordinated activities to strengthen the collection, analysis, presentation and use of census and survey data. All new country activities will be implemented under the new PASA. For additional information about this new PASA see the following page.

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MEASURE: BUCEN Survey and Census Information, Leadership, and Self-Sufficiency (BUCEN-SCILS)

Cooperating Agency	U.S. Bureau of the Census (BUCEN)
Project Number	TBD
Agreement Number	TBD
Duration	6/02-5/07
Geographic Scope	Worldwide

Purpose: The MEASURE Program is a coordinated effort to improve the collection, analysis and presentation of data for use in planning, policymaking, managing, monitoring and evaluating population health and nutrition programs. BUCEN-SCILS seeks to strengthen the capability of statistical offices in developing countries to collect, analyze, disseminate and use data to increase understanding of population structure and demographic trends and their implications for development planning and policy making.

Description: This PASA with BUCEN supports:

Country-specific technical assistance to build the capacity of national statistical organizations to implement censuses and other surveys – including technical consultations and training in census design, management procedures, data collection and processing, demographic data analysis, dissemination, and use of census data; *in-country, regional and US-based workshops and study tours* - including training activities to strengthen capacity to design and manage census and survey implementation and to analyze, disseminate and use demographic data; *centrally-coordinated activities that support worldwide efforts to improve collection, analysis and use of census and survey data*, maintenance and dissemination of the International Data Base, a web-based databank containing demographic and socio-economic data for 227 countries and areas of the world.

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MEASURE CDC

Cooperating Agency	Centers for Disease Control and Prevention (CDC)
Project Number	936-3038.01
Agreement Number	HRN-P-00-97-00014-00
Duration	10/97-9/02
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE CDC seeks to improve the quality and availability of appropriate data on reproductive health status and services, and to enhance the ability of local organizations to collect, analyze and disseminate such information.

Description: With its work in Reproductive Health Surveys, MEASURE CDC represents the fifth component of the MEASURE Results Package. Each CDC survey is tailored to meet the needs of the country and reproductive health program where it is being conducted, and works to improve information about health and fertility. Special modules can be added to answer questions specific to a given country or program such as modules on young adults, domestic violence, children's school attendance, HIV/AIDS, nutrition and sterilization.

CDC provides technical assistance with four types of surveys: Reproductive Health Surveys, Male Reproductive Health Surveys, Young Adult Reproductive Health Surveys and Reproductive Health Program Evaluation Surveys. Technical assistance is provided in designing and carrying out surveys relevant to each setting, in collaboration with local host country organizations. CDC places a high priority on training local counterparts in all aspects of survey design and implementation.

Special Information: In the summer of 2002, this PASA will be replaced with a new PASA with CDC as described on the following page. Missions interested in accessing the services of CDC/DRH should put field support into the new agreement.

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MEASURE CDC/DRH

Cooperating Agency	Centers for Disease Control and Prevention (CDC)
Project Number	TBD
Agreement Number	TBD
Duration	6/02-5/07
Geographic Scope	Worldwide

Purpose: The MEASURE program is a coordinated effort to improve the collection, analysis and presentation of data for use in planning, policymaking, managing, monitoring and evaluating population, health and nutrition programs. Within this context, MEASURE CDC seeks to increase understanding of the key family planning/reproductive health (RH) issues, improve the quality and availability of appropriate data on reproductive health status and service, and enhance the ability of local organizations to collect, analyze and disseminate such information.

Description: This agreement with the Division of Reproductive Health at CDC provides technical assistance in survey design and implementation, RH epidemiology, refugee RH and a small amount of commodity logistics management.

Each CDC **survey** is tailored to meet the needs of the country and RH program where it is being conducted, and works to improve information about health and fertility. CDC provides technical assistance with four types of surveys: Reproductive Health Surveys, Male Reproductive Health Surveys, Young Adult Reproductive Health Surveys and Reproductive Health Program Impact Evaluation Surveys. Special modules can be added to answer questions specific to a given country or program such as modules on young adults, domestic violence, children's school attendance, HIV/AIDS, nutrition and sterilization. In this agreement, new survey modules will be developed and used in countries where new areas of concern are mutually identified. There will also be increased emphasis on bringing findings and their programmatic implications to the attention of policymakers and managers responsible for program decisions. In **epidemiology**, (the training function will be tied more closely to translating survey and other epidemiological information into programmatic decisions) there will be increased emphasis on addressing questions of prevention of unintended pregnancy and HIV/AIDS, while in **refugee RH**, epidemiological, behavioral, and organizational investigation will contribute to efforts to mitigate adverse reproductive health conditions in these particularly vulnerable populations.

Special Information: This agreement with CDC replaces the CDC activities described on the previous page and in the FPLM/CDC project description in the Contraceptives and Logistics Management section of this guide. Missions interested in accessing the services of CDC for any of these activities should put field support into this agreement.

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MEASURE *Communication*

Cooperating Agency	Population Reference Bureau (PRB)
Project Number	936-3083.03
Agreement Number	HRN-A-00-98-00001-00
Duration	10/97-9/03
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *Communication* seeks to promote wider dissemination and increased use of information on population, health, and nutrition; and to strengthen capabilities of host-country and regional institutions to communicate results of data analysis and research to key audiences.

Description: MEASURE *Communication* provides information needs assessments, technical assistance and training, and produces materials for program and policy audiences on key issues in population, health, and nutrition. MEASURE *Communication* emphasizes dissemination of results from data collection, analysis, and monitoring and evaluation carried out under the MEASURE Results Package. Data and results from other USAID-supported projects and other sources are also communicated to meet information needs of program managers and policy makers.

Activities include:

- Working with host-country institutions, USAID Missions, media organizations, the private sector, and other CAs to plan and implement dissemination strategies for optimal use;
- Building capacity of host-country institutions to communicate information and research results effectively, through in-country, regional, and global training and technical assistance;
- Assessing information needs and maintaining feedback from global and country-specific audiences to evaluate the relevance and impact of data, research and evaluation findings; and
- Producing and disseminating global and country specific materials (print, electronic, and other formats) and synthesizing results of data analyses, in-depth research, and evaluation.

Subcontractor: Academy for Educational Development (AED).

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MEASURE *DHS*+

Cooperating Agency	ORC Macro
Project Number	936-3083.01
Contract Number	HRN-C-00-97-00019-00
Duration	10/97-9/04
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *DHS*+ seeks to improve information through appropriate data collection, analysis, and evaluation; and to strengthen the data collection and utilization capabilities of host-country institutions.

Description: MEASURE *DHS*+ continues USAID's involvement in global data collection with an increased focus on country data needs and on utilization of data for evaluation and monitoring purposes. MEASURE *DHS*+ emphasizes both qualitative and quantitative data collection methods and includes non-survey data collection approaches such as information systems and service statistics. The project is also more flexible than previous data collection initiatives in terms of content and geographic coverage.

The DHS Core Questionnaire has been modified to include the following information: a five-year monthly calendar of all pregnancies, quality of care, postnatal care, vitamin A intake, sanitation practices, decision making about children's and women's health, and anemia testing for all children and women of reproductive age. The surveys also include an expanded set of questions on HIV/AIDS and STIs. New modules have been added on such topics as malaria, health expenditures, women's empowerment, and domestic violence. MEASURE *DHS*+ also collects information on the service environment through facility surveys that may be organized independently or in conjunction with the main survey.

Other activities of MEASURE *DHS*+ include:

- Developing long-term cost-effective data collection plans;
- Strengthening in-country capacity to collect and utilize data through short-term training activities, on-the-job skills transfer, formal workshops at the country or regional level, providing assistance with formal training courses in host country institutions, and web-based training sessions;
- Assisting countries to efficiently utilize data sources other than national level surveys, such as management and health information systems, censuses, sentinel surveillance, sample registration systems, and international and local databases;

Special Requirements: Although this contract will be in place through 9/04, FY02 will be the last year of field support taken. Missions should plan to put FY03 FS into the next DHS contract, to be awarded mid FY03.

Subcontractors: Population Council and The East West Center.

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MEASURE *Evaluation*

Cooperating Agency	Carolina Population Center, University of North Carolina
Project Number	936-3083.02
Agreement Number	HRN-A-00-97-00018-00
Duration	9/97-9/03
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, *MEASURE Evaluation* seeks to improve monitoring and evaluation coordination/partnerships at international, USAID, cooperating agency and country levels; to strengthen the monitoring and evaluation capabilities in host-country institutions; and to improve monitoring and evaluation tools and methodologies.

Description: The *MEASURE Evaluation* cooperative agreement emphasizes monitoring and evaluation assistance to host-country population, health and nutrition programs as well as to other cooperating agencies, international donors, USAID Missions and USAID/Washington.

Specific activities of *MEASURE Evaluation* include the following:

- Coordinating the development and implementation of comprehensive monitoring and evaluation strategies and plans (including performance monitoring plans) for interested USAID Missions and host-country PHN programs while developing in-country capacity;
- Conducting monitoring and evaluation working groups for indicator and tool development;
- Conducting in-country and U.S.-based training in monitoring and evaluation;
- Supporting qualified candidates for master's degree training in monitoring and evaluation at three regional universities (the University of Costa Rica, Mahidol University in Thailand, and the University of Pretoria in South Africa), and;
- Developing monitoring and evaluation methods that are useful for monitoring program progress on an annual or biannual basis, such as routine health information systems, facility surveys, and qualitative studies.

Subcontractors: John Snow Research and Training Institute; Macro International, Inc.; and Tulane University.

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POLICY II

Cooperating Agency	The Futures Group International
Project Number	936-3078.02
Contract Number	HRN-C-00-00-00006-00
Duration	7/00-7/05
Geographic Scope	Worldwide

Purpose: To help build a supportive policy environment for family planning and reproductive health programs by encouraging policies and plans that promote and sustain access to quality family planning and reproductive health information and services.

Description: POLICY II offers policy assistance for an array of reproductive health issues, particularly family planning, HIV/AIDS, and maternal health. Assistance is available in four areas: **1) *Building and Strengthening Political and Popular Support*** by providing assistance to identify and strengthen policy champions; form and strengthen NGO coalitions; and expand the participation of NGOs (including youth, gender, and human rights representatives as appropriate) in the policy process. **2) *Improving Planning and Financing for FP/RH*** to help policymakers design policies and financial mechanisms to increase the level of available resources and to promote the most efficient and sustainable use of those resources to provide RH services. **3) *Providing Information to Inform Policy Decisions*** by making information available to support policy decision-making by conducting or commissioning country-specific research to answer key policy questions. It provides user-friendly models (e.g. RAPID, AIM, FamPlan, MTCT) and other tools for data analysis and policy dialogue and helps strengthen local capacity to choose among analysis tools; and **4) *Enhancing In-country/Regional Capacity to Carry Out Policy Work*** by training and supporting locally-hired long term advisors to promote the policy process in-country. These advisors also provide on-the-job training and support to policy analysts, advocates, and policymakers. The Project also develops new approaches to institutionalize training capacity, e.g., curriculum development at regional universities.

Subcontractors: The Centre for Development and Population Activities (CEDPA) and Research Triangle Institute (RTI).

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Contraceptive Research and Development (CONRAD III)

Cooperating Agency	Eastern Virginia Medical School (EVMS)
Project Number	936-3095
Agreement Number	HRN-A-00-98-00020-00
Duration	8/98-8/03
Geographic Scope	Worldwide

Purpose: To develop new and improved methods of family planning and other reproductive health technologies for use in developing countries, with a particular emphasis on products designed to prevent pregnancy and the transmission of sexually transmitted infections (STI), including HIV/AIDS.

Description: The primary focus of the CONRAD program is on the early stages of research and development, beginning with targeted or applied research studies and progressing through the first two phases of clinical testing in humans. The program supports subprojects conducted by scientists worldwide, as well as laboratory and clinical research conducted at the Department of Obstetrics and Gynecology, EVMS. Areas of research that have been given highest priority for the development of more effective, safer and more acceptable reproductive health technologies include, but are not limited to:

1. Woman-controlled products that offer protection from both unplanned pregnancy and from STI/HIV, including microbicides
2. New barrier methods for women and men; and
3. Long-acting injectable and implantable contraceptives for women and men.

CONRAD III also supports research on the mechanisms and control of heterosexual transmission of HIV, and on the effect of contraceptive use on heterosexual transmission of HIV and other STIs. CONRAD III sponsors international workshops and technical meetings which bring together collaborating scientists and other leading experts to focus research efforts and disseminate technical information.

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Contraceptive Technology Research (CTR)

Cooperating Agency	Family Health International (FHI)
Project Number	936-3079
Agreement Number	CCP-A-00-95-00022-00
Duration	9/95-8/05
Geographic Scope	Worldwide

Purpose: To develop, evaluate, and introduce a range of safe, effective, and acceptable contraceptive methods and reproductive health technologies to enhance the capacity of family planning and reproductive health researchers and programs in developing countries to evaluate and provide these technologies.

Description: The project includes the following activities: 1) developing new contraceptive methods and reproductive health technologies, and providing the documentation for regulatory approval; 2) conducting clinical trials and epidemiologic studies to evaluate the safety and efficacy of various contraceptive methods, as well as other reproductive health technologies, under different conditions; 3) assessing the acceptability and impact on users and programs of various contraceptive methods and reproductive health technologies; 4) carrying out surveillance and testing of contraceptive commodities to ensure product quality; training overseas clinicians in contraceptive and other reproductive health technologies; and collecting, analyzing, and disseminating research findings, and provides technical assistance to programs to utilize state of the art research for service delivery improvement; 5) Developing and testing tools and strategies to improve access and quality of RH services.

Priority areas are: development of new and improved barrier methods and spermicides for pregnancy and HIV-AIDS/STD prevention; improving contraceptive quality; assessing contraceptive benefits and risks; improving access to contraception through reduction of medical barriers; improving cost-effectiveness of programs; and, introducing new or under-utilized methods, such as the IUD and female condom.

This project has documented the comparative safety, efficacy, and acceptability in different developing country settings of methods such as minilap and laparoscopic sterilization, NORPLANT®, copper IUDs, low-dose oral contraceptives, post-partum IUDs, and various barrier contraceptives, including condoms.

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Natural Family Planning & Reproductive Health Awareness (The AWARENESS Project)

Cooperating Agency	Georgetown University/ Institute for Reproductive Health (GU/IRH)
Project Number	936-3088
Agreement Number	HRN-A-00-97-00011-00
Duration	7/97-5/027
Geographic Scope	Worldwide

Purpose: To improve and expand Natural Family Planning (NFP) services, develop new strategies and approaches to increase Reproductive Health Awareness (RHA) in developing countries; and to improve the policy environment of host country PHN programs.

Description: The objective of the NFP/RHA program is to improve and expand natural family planning services and develop new strategies and approaches to increase reproductive health awareness of individuals and communities in developing countries. The NFP/RHA activity will address the needs of people who are using a natural method to avoid pregnancy but lack the information and skills to do so effectively, as well as those who would choose a natural method if it were available to them.

The NFP/RHA program will expand natural family planning services and improve reproductive health through a cooperative agreement with Georgetown University/Institute of Reproductive Health (GU/IRH). NFP/RHA contains the following elements:

- developing simplified natural methods of family planning;
- mainstreaming natural family planning into existing family planning programs, where appropriate;
- increasing reproductive health awareness among communities;
- placing emphasis on the costs and cost-effectiveness of NFP and RHA services; and
- placing emphasis on capacity-building of public- and private-sector institutions to provide natural family planning services and raise reproductive health awareness.

The program is currently introducing a new simple method - the Standard Days Method (SDM), into countries world wide, and testing another method - The Two Day Method (TDM), through clinical trials. The program also focuses on empowering women and men to participate in their own reproductive health care and decision-making through disease prevention; early recognition, self-referral, and treatment of disease; and, active, informed decision-making on their own behalf. Countries interested in expanding choice to include effective habitual methods should contact either the IRH or the USAID technical admin.

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Population Technical Assistance (POPTECH)

Cooperating Agency	LTG Associates, Inc.
Project Number	936-3024
Agreement Number	HRN-C-00-00-00007-00
Duration	8/00-8/05
Geographic Scope	Worldwide

Purpose: To provide G/PHN/POP and Agency field missions with flexible access to the technical expertise needed to develop, monitor and evaluate program activities.

Description: POPTECH contracts continue to provide short-term technical assistance for G/PHN/POP and USAID field missions. By maintaining a consultant registry database of technical experts, they are able to take on activities such as program reviews, evaluations (programmatic or thematic) and assessments; program designs and strategies; providing specialized technical assistance (including, but not limited to, needs assessments, report writing, TA for special initiatives, etc.); dissemination of lessons learned and best practices from a broad range of countries and programs in the PHN sector; and, conducting meetings and workshops both in the U.S. and overseas. Other specialized assistance include providing TA for refining SOWs and conducting background studies or papers; and the use of consultants for short- to medium-term assignments to help fill staffing shortages in overseas missions. Each year, POPTECH will hold a Key Consultants Workshop for selected key consultants, aimed at enhancing the effectiveness and efficiency of POPTECH teams. Additional information about POPTECH can be found on their website (www.poptechproject.com), along with various POPTECH reports and the POPTECH Tool Series, developed in collaboration with the MEASURE Evaluation project.

Subcontractor: TvT Associates, Inc.

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The Population Council Program III

Cooperating Agency	Population Council
Project Number	936-3097
Agreement Number	HRN-A-00-99-00010-00
Duration	8/99-8/04
Geographic Scope	Worldwide

Purpose: The purpose of this activity is to: (1) develop, evaluate, and bring to market new and better products for family planning (FP) and prevention of sexually transmitted infections (STIs), including a major program on the development of microbicides; (2) support selected studies on service delivery impact of FP use, maternal and child health, and STIs; and (3) conduct demographic and social science research of high policy relevance.

Description: Research in the contraceptive development area has resulted in the U.S. Food and Drug Administration's approval of a new two-rod levonorgestrel implant contraceptive. Current research is focused on the development of hormone-releasing vaginal rings, second generation subdermal implants, long-acting reversible methods for male contraception, and development of microbicides. This work is aimed at expanding contraceptive choice by broadening the range and availability of contraceptive options for women and men. The agreement also supports an experimental study in Ghana that tests the demographic impact of launching family planning and health services in a rural setting where the initial demand for services was low and service delivery capacity was weak. In addition, research and technical assistance support such areas as the development of assessment tools for examining specific issues surrounding adolescent reproductive outcomes and selected topics in demographic analysis.

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Reproductive Health Operations Research (FRONTIERS)

Cooperating Agency	Population Council
Project Number	936-3086
Agreement Number	HRN-A-00-98-00012-00
Duration	6/98-6/03
Geographic Scope	Worldwide

Purpose: To contribute to the achievement of the PHN Center strategic objectives by improving the quality, accessibility, and cost-effectiveness of family planning and other reproductive health services through operations research and technical assistance. FRONTIERS conducts research on issues of both national and global importance. It also builds the capacity of developing country organizations to use operations research as a management tool to diagnose and solve service delivery problems.

Description: Operations research provides the empirical base for making decisions on how best to improve family planning and other reproductive health programs. FRONTIERS is the centerpiece of G/PHN's FP/RH service delivery research portfolio. The cooperative agreement consolidates previous regional work into one global project. FRONTIERS is testing innovative solutions to service delivery problems, assuring dissemination and utilization of results, and building OR capacity. Multi-country studies on issues of global importance, such as serving youth, integration of services, improving quality of care, and financing are a major focus of the program. Other key components include country and regional studies, capacity building, a small grants program, a focus on research utilization, and partnerships with a wide range of cooperating agencies and other organizations.

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WHO Special Program of Research, Development and Research Training in Human Reproduction (HRP)

Cooperating Agency	Reproductive Health Research Department(RHR), World Health Organization (WHO)
Project Number	936-3067
Agreement Number	N/A (Grant via Memorandum of Understanding through Dept. of State)
Duration	Ongoing since 1993
Geographic Scope	Worldwide

Purpose: To conduct research to generate evidence for the development of reproductive health interventions, including family planning, with particular reference to the needs of individuals and couples in developing countries.

Description: USAID provides funds to the Human Reproduction Program (HRP) which is the main instrument within the United Nations system for research in reproductive health. HRP is cosponsored by the United Nations Development Program, the United Nations Population Fund, the World Health Organization and the World Bank. The Program brings together health-care providers, policymakers, scientists, clinicians, and consumer and community representatives to identify and address priorities for research aimed at improving reproductive health. The WHO Department of Reproductive Health and Research brings together into one Department all of WHO's work in sexual and reproductive health, thus enabling a comprehensive response of both research and support to countries to protect and promote reproductive health in a coordinated way.

The Program investigates through biomedical, operations and social science research, the extent and nature of reproductive health problems, their determinants and the interventions needed for their alleviation or resolution. While fertility regulation has remained the core area of the Program's research, the research agenda in recent years has been broadened to include other challenges in reproductive health such as maternal health and reproductive tract infections including cervical cancer. This reflects the Program's response to the wide range of issues in reproductive health identified in international fora, particularly the International Conference on Population and Development in 1994 and the Fourth World Conference on Women in 1995. The Program also carries out activities to strengthen the capabilities of developing countries to meet their own research needs and to enable them to participate in the global effort in reproductive health research.

The Program promotes the use of research results in policymaking and planning at national and international levels and contributes to the setting of norms, standards and guidelines, including ethical guidelines, in the field of reproductive health research. The Program works to ensure that gender issues, and particularly the perspectives of women, are reflected in both its research and research capability strengthening activities to foster the achievement of greater equity and sexual and reproductive rights.

Note: This project does not accept Field Support Funds.

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Acute Respiratory Infections Vaccine Project

Cooperating Agency	Program for Appropriate Technology in Health (PATH)
Project Number	936-6000.04
Agreement Number	HRN-A-00-95-00025-00
Duration	9/95-9/03
Geographic Scope	Worldwide

Purpose: To facilitate the incorporation of promising new and improved vaccines against acute respiratory infections into the childhood immunization programs of developing countries. The project is part of USAID's Children's Vaccine Program.

Description: The overall objective of the project is to evaluate the impact and cost-effectiveness of introducing ARI vaccines into EPI programs in developing countries. Initially the project is focusing on Haemophilus Influenzae type b (Hib) vaccine, a vaccine whose introduction in America and Europe has led to the virtual elimination of Hib meningitis among children.

Through a process of criteria definition and prioritization, the island of Lombok in Indonesia was selected for the first study. That study is now underway in a three-way collaboration among PATH, the Association Pour l'Aide a la Medicine Preventive (AMP) in France, and the Indonesian Ministry of Health. The specific goal of the study is to analyze the impact of Hib on the incidence of pneumonia among a population of 24,000 children, using the Hib vaccine as a probe. A carriage study has already been conducted that demonstrated the presence of Hib in this population, and surveillance and referral systems in 50 study villages have been set up. The vaccine introduction phase of the study will take four years, starting in the Fall of 1998, using a vaccine from a donation to UNICEF.

The results of the study in Indonesia will assist the government in determining the appropriateness and cost/benefits of adopting the Hib vaccine into regular EPI schedules. These results should also be of interest to other developing country governments, especially in Asia. The systems are also in place on Lombok to pursue similar studies of other ARI vaccines.

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Basic Support for Institutionalizing Child Survival II (BASICS II)

Cooperating Agency	Partnership for Child Health Care, Inc.
Project Number	936-3096.01
Contract Number	HRN-C-00-99-00007-00
Duration	6/99-6/04
Geographic Scope	Worldwide

Purpose: The Basic Support for Institutionalizing Child Survival Activity (BASICS II) is a major component of G/PHN's global work to implement USAID's Child Survival program. BASICS II develops innovative and improved policies and program approaches, provides technical leadership within the Agency and the international Child Survival program community, and enters into technical partnerships with field missions and other bureaus to improve the technical quality and effectiveness of programming in USAID-assisted countries.

Description: BASICS II is designed to incorporate state-of-the-art expertise, extensive field experience and capability in the development and implementation of Child Survival programming in developing countries. It also influences global and country policies and strategies related to child health and nutrition. It applies its expertise to assist G/PHN – in partnership with other USAID bureaus and missions, other international health organizations, and USAID-assisted countries – in achieving the G/PHN strategic objective of “increased use of effective, improved and sustainable child health interventions” and in contributing to the Agency’s strategic objective of “improving infant and child health and nutrition and reducing infant and child mortality.” BASICS II is organized around four key technical focus areas:

1. Increased effectiveness and sustainability of child immunization;
2. Integrated approaches to child health;
3. Incorporating nutrition into Child Survival activities;
4. Neonatal survival and health.

In addition to these four technical focus areas, the project gives special attention to malaria and HIV/AIDS as it impacts on child health. BASICS II is a performance-based contract that achieves its results through the provision of technical leadership, regional and global initiatives, capacity building, and long-term country programs. BASICS II also provides expertise in operations and evaluation research, performance and results monitoring, and strategic documentation and transfer of experience, to support achievement of results in its technical focus areas and country and regional programs.

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The CHANGE Project

Behavior Change Innovation/State-of-the-Art Activity

Cooperating Agency	Academy for Educational Development (AED)/ The Manoff Group
Project Number	936-3096.04
Agreement Number	HRN-A-00-98-00044-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: To provide a focused source of leadership and technical assistance on behavior change to PHN programs worldwide. The purpose of the project is to develop and apply new, state-of-the-art techniques for behavior change that will allow missions to increase the impact, sustainability, scale and cost-effectiveness of their interventions in child health, maternal health, and nutrition.

Description: Over 25 years of IEC (information, education, and communication) and social marketing interventions have resulted in numerous solid successes for PHN programs. However, in many programs, significant gaps between knowledge and behavior still remain, and key areas of behavior change such as at the institutional, community, and family levels are not addressed. The CHANGE Project is designed to develop and apply innovative new tools and approaches drawn from the full range of disciplines in the field of applied behavior change to help missions close “knowledge-behavior” gaps and address behavior change at many levels. Some of the new approaches being developed and applied by CHANGE include:

- tools to produce supportive policy and institutional environments through techniques of structural or organizational change;
- techniques to accomplish group and community change through normative and relational change approaches;
- improved techniques for individual behavior change;
- improved approaches to social marketing; and
- application of leading edge technologies in media and communication.

CHANGE can work with regional bureaus and field missions to implement new behavior change programs or can work with existing cooperating agencies and contractors to strengthen existing programs by introducing and supporting new approaches. CHANGE also can provide strategic review and guidance for existing programs and programs under development.

The CHANGE partnership with USAID is through a cooperative agreement and through USAID Mission contributions. CHANGE is implemented in partnership with USAID-financed collaborating agencies and can work with other international donors and both U.S. based and local PVOs. When working with PVOs, CHANGE project funds can be used to supplement existing project staffing and other direct costs to these organizations as needed within the context of a CHANGE project intervention.

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Child Health Research: Applied Research in Child Health (ARCH)

Cooperating Agency	Boston University 936-5986.09
Project Number	HRN-A-00-96-90010
Agreement Number	8/96-1/04
Duration	Worldwide
Geographic Scope	

Purpose: The ARCH Project, a partner in the Child Health Research Project, supports policy relevant applied and operations research efforts that are initiated, designed, and managed by host country scientists and institutions. ARCH provides technical assistance to USAID Missions in problem analysis and design of health programs.

Description: ARCH works in four broad themes:

Theme I: Interventions to Improve Child Survival

- Improving ARI and diarrheal diseases prevention and case management through testing of improved behavioral, micronutrient and clinical approaches; and,
- Improving the use of medicines, especially antimicrobials, that contribute to the emergence of antimicrobial resistance.

Theme II: Economic Analyses and Health:

- Conducting burden of antimicrobial resistance on health systems and facilities;
- Assessing benefits of greater investments in expanded HIV prevention and HIV/AIDS treatment; and,
- Analyzing the impact of HIV/AIDS epidemic on private sector firms and government institutions.

Theme III: Understanding the Social and Economic Impact of the HIV Epidemic

- Identifying and developing interventions to address the health needs of orphans.
- Policy analysis of the “burden shift” of the costs of responding to the epidemic among business, government, and households.

Theme IV: Malaria and Child Survival

- Institutional Collaboration grant with National Malaria Control Program in Zambia
- Bilateral malaria research programs in Zambia and Nigeria

Selected Accomplishments:

- Demonstrated that both small group lecture-style and interactive sessions are effective in altering and improving antimicrobial prescribing practices by health care personnel;
- Demonstrated that the beneficial effect of using a reduced salt concentration ORS for the treatment of children with acute non-cholera diarrhea
- Demonstrated that the impact of the HIV epidemic on private companies varies widely among and within firms, and most firms will have positive returns on investment on HIV treatment and prevention
- Gathered and disseminated useful information on regional differences in *in vivo* chloroquine resistance and predictors of chloroquine treatment failures.

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Child Health Research ICDDR,B: Centre for Health and Population Research, Bangladesh

Cooperating Agency	ICDDR,B: Centre for Health and Population Research
Project Number	936-5986.06
Agreement Number	HRN-A-00-96-90005
Duration	1/96-1/04
Geographic Scope	Worldwide

Purpose: ICDDR,B focuses on the development of cost-effective child health and survival programs by enhancing the understanding of the major causes of childhood morbidity and mortality. The ICDDR,B conducts research, maintains active training programs, develops rapid response protocols and programs and tests cost-effective public health interventions through operations research.

Description: The ICDDR,B, a leading international research institution located in Bangladesh, is engaged in the development, delivery and use of effective family health and child survival technologies through applied, evaluation and operations research. Emphasis is placed on south-south collaboration and developing institutional relationships with health research organizations regionally. The ICDDR,B maintains an active urban operations research initiative and a unique demographic research effort in Matlab, for epidemiological studies including cholera, epidemic surveillance, and evaluation of reproductive, maternal, and child health interventions. In addition, ICDDR,B provides training in case management, performs laboratory diagnosis, and serves as a laboratory reference center. ICDDR,B works directly with Missions. Priority activities include:

- Developing new interventions and approaches in preventing and treating diarrheal diseases (DD) and acute respiratory infections (ARI);
- Developing and testing new interventions to address malnutrition and micronutrient deficiencies;
- Reducing Neonatal morbidity and mortality by developing interventions to address low birth weight, bacterial vaginosis, and sepsis;
- Conducting surveillance, trend analyses and developing strategies to address DD, ARI antimicrobial resistance, RTI/STC, HIV/AIDS, dengue and tuberculosis; and,
- Improving health systems and delivery of family planning services through operations research.

Recent achievements and ongoing efforts include:

- Development and implementation of a successful Essential Services Package for child and reproductive health;
- Establishing the effectiveness of oral zinc in the treatment of childhood diarrhoeal disease;
- Launch of a multidisciplinary, intergenerational approach to address low birth weight and malnutrition;
- Establishment of a national response program to dengue; and
- Development of ARI antimicrobial resistance surveillance capacity in Nepal.

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Child Health Research: Family Health and Child Survival (FHACS)

Cooperating Agency	Johns Hopkins School of Public Health
Project Number	936-5986.05
Agreement Number	HRN-A-00-96-90006
Duration	1/96-1/04
Geographic Scope	Worldwide

Purpose: The Johns Hopkins's Family Health and Child Survival (FHACS) cooperative agreement identifies new technologies and methods for improving child survival and family health. The emphasis is on the development of effective and integrated services that impact on child survival and control of infectious diseases and nutritional deficiency in developing countries.

Description: FHACS develops and evaluates the feasibility and cost-effectiveness of new interventions and approaches to reducing child morbidity and mortality. It conducts applied, operations and evaluation research. Priority areas include:

- Determination of burden of disease for acute respiratory infections, diarrheal diseases and malnutrition including ascertaining risk factors;
- Reducing neonatal morbidity and mortality;
- Evaluation of vaccines and development of diagnostics for acute respiratory infections and multi-drug resistant tuberculosis;
- Development and delivery of interventions to address malnutrition and micronutrient deficiencies; and
- Development of new approaches to treat and control malaria, tuberculosis, and other infectious diseases.

Recent achievements and ongoing efforts include:

- Demonstration that zinc supplementation reduces childhood morbidity due to pneumonia and diarrhea and may also reduce all-cause mortality;
- Finding of high efficacy of pneumococcal vaccine in prevention of meningitis;
- A community-based treatment of neonatal sepsis and pneumonia;
- Recommendations for neonatal and perinatal health interventions that can be implemented into programs; and
- A new, rapid diagnostic for multi-drug resistant TB.

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Child Health Research: International Clinical Epidemiology Network (INCLN)

Cooperating Agency	International Clinical Epidemiology Network (INCLN)
Project Number	936-5986.12
Grant Number	HRN-G-00-99-00003
Duration	3/99-1/04
Geographic Scope	Worldwide

Purpose: INCLN, a network of leading host country clinical epidemiologists, health economists, social scientists, healthcare providers and applied researchers, conducts training to build capacity and utilizes state-of-the-art epidemiological research methods to identify health threats and to analyze the efficacy, efficiency, and equity of health interventions and preventive measures.

Description: INCLN's network operates in 24 developing countries including Egypt, India, Uganda, Zimbabwe, Mexico, Philippines, Thailand, Indonesia, and Brazil. INCLN's host country scientists conduct relevant training and research providing solutions to improve the health of people. The INCLN networks address country-specific, interregional, and international child survival challenges.

Currently INCLN assists USAID Missions and AID/W by conducting surveillance, assessments, and evaluations. INCLN is currently:

- Establishing surveillance approaches for malaria, tuberculosis, STIs, and other infectious diseases;
- Creating a network of sentinel surveillance sites in hospitals and in the community to monitor the magnitude of pneumococcal disease and antimicrobial resistance of ARI pathogens;
- Improving birth outcomes by establishing a reproductive health network that can better diagnose and treat group B strep and bacterial vaginosis, decreasing the incidence of prematurity and low birth weight; and
- Fostering a focused child health research network (INCLN ChildNET), with members from Asia, Africa and Latin America, to address outstanding health research priorities such as ARI, malaria, and nutrition.

Recent achievements and ongoing efforts include:

- Establishment of IndiaCLEN Invasive Bacterial Infection Surveillance, which demonstrated that H. influenza is the most common cause of childhood bacterial meningitis in India and suggested the use of the Hib vaccine will prevent up to 97% of all invasive haemophilus disease seen in hospitals in India;
- Surveillance of antimicrobial resistance of ARI pathogens in hospitals and in the community in India;
- Assessment of the impact of National Immunization Days for Polio on other primary care programs;
- Evaluation of short-term amoxicillin therapy for childhood pneumonia.

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Child Health Research: World Health Organization/Child and Adolescent Health and Development (WHO/CAH)

Cooperating Agency	World Health Organization (WHO)
Project Number	936-5986.08
Grant Number	AAG-G-00-97-00024
Duration	9/96-1/04
Geographic Scope	Worldwide

Purpose: To identify, sustain, and increase the effectiveness of strategies and technologies that advance child survival in developing countries. As a partner in the Child Health Research Project, WHO/CAH refines existing technologies and develops new and cost-effective interventions to reduce mortality and morbidity associated with major childhood illnesses. Results of these efforts establish global and national guidelines, standards and policies used by health practitioners in hospitals, clinics, and community settings.

Description: WHO/CAH, works with global partners including applied researchers, bilateral agencies, and host countries to:

- Monitor and coordinate research that will result in new interventions, methodologies, and/or the establishment of global guidelines for case management and prevention of the major causes of neonatal and childhood mortality and morbidity - acute respiratory infections, diarrheal diseases, malaria, malnutrition and micronutrient deficiencies; low birth weight, and sepsis;
- Facilitate operations research for the implementation of best practices in case management and the development of training modules; and,
- Monitor and evaluate progress of advances in child health.

Recent achievements and ongoing efforts include:

- Implementation, adaptation, and evaluation of the Integrated Management of Childhood Illness (IMCI) approach;
- Identification and potential treatments for the major causes of infectious illness in neonates;
- Demonstration of new vaccine efficacy prior to incorporation into national vaccine programs;
- Strategies for families and health-care providers to prevent disease and increase care seeking; and,
- Reduction of infectious disease mortality – even in areas of endemic HIV – with exclusive breastfeeding.

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Children's Vaccine Program (CVP): Vaccine Independence Initiative (VII)

Cooperating Agency	UNICEF
Project Number	936-6000.01
Grant Number	HRN-G-00-92-00011-00
Duration	1/92-9/03
Geographic Scope	Worldwide

Purpose: To promote the sustainability of national immunization programs by providing a mechanism for the forecasting, financing, and procurement of high-quality vaccines.

Description: Childhood immunization programs have been one of the great public health success stories in the past two decades, with an estimated 2.5 million child deaths now prevented annually through national Expanded Programs for Immunization (EPI). However, the sustainability of these achievements is jeopardized by the dependence of many developing countries on donations of vaccines from UNICEF and bilateral donors. Due to financial constraints of donors and concerns about sustainability, many countries that currently receive vaccines by donations are being encouraged to start purchasing at least a portion of their own vaccines. Yet many are unable to:

- accurately forecast and plan vaccine needs;
- prepare a vaccine tender and negotiate directly with manufacturers; or
- supply the hard currency that manufacturers require in advance of vaccine delivery.

USAID Children's Vaccine Initiative Project, in partnership with UNICEF, designed the Vaccine Independence Initiative (VII) to help countries overcome these obstacles. The VII is a vaccine-purchase revolving fund. It is modeled after a similar fund managed by the Pan American Health Organization that has successfully functioned in Latin America for over a decade. The potential benefits of the VII extend to all countries (outside Latin America) who are committed to buying vaccines and who need assistance in forecasting, planning, and ordering those vaccines. To participate in the VII, countries must formally commit, in written agreements with UNICEF, to purchase some or all of their vaccine needs. UNICEF will then provide technical assistance to the countries to enhance their capabilities in vaccine supply forecasting and planning. The fund allows participating countries to use soft or hard currency to purchase the high-quality vaccines on a routine basis and to pay, if necessary, upon receipt of the vaccines. Purchase of the vaccines is undertaken using the well-established UNICEF procurement system, which has successfully negotiated low prices for high-quality vaccines for many years.

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HealthTech IV: Technologies for Child Health

Cooperating Agency	Program for Appropriate Technology in Health
Project Number	936-3096.07
Agreement Number	GPH-A-00-01-00005
Duration	9/01-9/06
Geographic Scope	Worldwide

Purpose: HealthTech identifies health needs that can be solved with technological solutions, then adapts, develops, tests, and introduces new health, nutrition and family planning technologies to meet those needs. The technologies are for use by primary health and family planning providers in the developing world to help stabilize populations and protect the health of women and children.

Description: For over 15 years, USAID has supported the development and testing of health technologies that are applicable to the prevention and treatment of disease in the developing world. Most technologies are developed in partnership with private sector companies and international health organizations such as WHO. Technologies successfully developed and already available on the market include:

- HIV Dipstick: a low-cost, simple HIV test that exceeds WHO standards;
- SoloShot: the first autodestruct syringe device, available globally through UNICEF;
- UniJect: a pre-filled, single-dose injection system usable with multiple medicaments including vaccines, injectable contraceptives, and uterotonics;
- Vaccine Vial Monitors: indicators on individual vials of oral polio vaccine (OPV) that change color with heat exposure, which can save up to \$10 million per year globally;
- Low-cost, simple diagnostic for malaria, which allows patients to be diagnosed and treated in the same day;

Other technologies under development include:

- Vaccine vial monitors for other vaccines besides OPV;
- Low-cost, simple diagnostics for tuberculosis, chlamydia, and gonorrhea;
- Inexpensive jet injectors for delivery of vaccines without a needle;
- Inexpensive test to monitor the relative vitamin A status within populations;
- Medical waste disposal technologies.

In addition, the HealthTech project offers technology-related services and assistance as requested by Missions or Bureaus. Examples of current of pst activities include:

- Management of a schistosomiasis vaccine development project in Egypt.
- Training in procurement of vaccines to the Ministry of Health in Armenia.
- Assistance in technology transfer to the medical products industry in India.
- Development of health information systems and disease tracking in Ukraine.
- AIDS prevention and education programs in collaboration with NGOs in Indonesia.
- Collaboration on the creation of a website on safe injection for Global Bureau.

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Helen Keller International (HKI)

Cooperating Agency	Helen Keller International (HKI)
Project Number	936-5122.04
Agreement Number	HRN-A-00-98-00013-00
Duration	10/97-3/03
Geographic Scope	Africa, Asia

Purpose: The overall goal of this five-year Cooperative Agreement is to contribute to sustainable reductions in micronutrient malnutrition among children and women in Africa and Asia through technical assistance to governments, private voluntary organizations (PVOs) and local non-governmental organizations (NGOs).

Description: HKI's nutrition programs initially focused on preventing xerophthalmia, the clinical form of vitamin A deficiency (VAD) that remains the leading cause of childhood blindness in developing countries. As the link between VAD and child mortality became clear, the nutrition program expanded to address subclinical VAD in vulnerable populations, particularly among preschool children. A recent field trial in Nepal suggests that improving the vitamin A status of women during pregnancy may also reduce maternal mortality. HKI's program has over 30 years of experience in designing, implementing, monitoring and evaluating nutrition interventions for children and women, including twenty-four projects funded by USAID. HKI is a leader in expanding and strengthening vitamin A capsule distribution systems, with documented increases in coverage and decreases in deficiency in Asia and Africa. HKI has also worked to increase consumption of a variety of plant and animal sources of vitamin A through social marketing activities in Asia and Africa. The HKI Bangladesh NGO Home Gardening and Nutrition Education Program has led to increased year-round production of fruits and vegetables and greater consumption of vitamin A-rich foods in more than 300,000 households. In the Philippines, HKI has developed a model program to strengthen decentralized management of nutrition programs at the provincial and municipal levels. In Indonesia, HKI has been conducting operations research and promoting school-based delivery of vitamin A, iron, anthelmintic and nutrition education among adolescent girls. HKI is particularly effective in building the capacity of governments and NGOs in nutritional assessment, policy and program development, training, monitoring and evaluation, and operations research.

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International Broadcasting Bureau/Voice of America

Cooperating Agency	Voice of America (VOA) IBB
Project Number	936-3096.10
Agreement Number	AAG-P-00-01-00001
Duration	4/01-9/05
Geographic Scope	Worldwide

Description: Through special programming developed by the Voice of America radio and TV operations, IBB has become a partner in the global effort to eradicate polio. The polio-related programming seeks to keep the world's attention on the effort through realistic reporting on the global eradication effort as well as to provide accurate health messages and news reports designed to mobilize adults to immunize children during National Immunization Days and routinely throughout the year. The Initiative also seeks to influence the media in targeted countries to continue providing coverage of National Immunization Days and to generate interest among political elites for continued support of the eradication effort. Funding under this agreement provides for travel and related activities by the Voice of America radio staff in targeted countries in Africa, South and Central Asia and the Near East where eradication is yet to be achieved. In 2001, for the first time HIV/AIDS reporting was included as part of the USAID/VOA agreement.

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International Children's Vaccine Training Program: Vaccine Quality Assurance Training Program

Cooperating Agency	Massachusetts Public Health Biologic Laboratories
Project Number	936-6000.05
Agreement Number	HRN-A-00-95-00023-00
Duration	9/95-9/02
Geographic Scope	Worldwide

Purpose: To improve the quality of vaccines used in developing counties.

Description: Over 60% of the Diphtheria, Tetanus and Pertussis (DTP) vaccine used worldwide is produced in developing countries. In order to help ensure that the current vaccines are of high quality, this activity has developed a program that will provide theoretical and practical training in: 1) current Good Manufacturing Practices (cGMP); 2) Vaccine Quality Assurance (QA); and 3) Quality Control procedures for Diphtheria, Tetanus and Pertussis Vaccine (QC). The program assists local manufacturers in establishing or improving their vaccine quality assurance programs. It also assists national regulatory authorities (NRAs) in understanding the requirements of GMP so that they can do a more effective job of regulating and inspecting vaccine production facilities. For countries that are procuring their vaccine rather than producing it locally, the program works with the national regulatory authority to help ensure that the vaccines they procure are of known good quality.

Developing countries are selected for training based on their commitment to strengthening or establishing a national program of regulation and control that ensures vaccines are manufactured according to world standards. In the case of non-producer countries the training program assists national authorities in controlling the quality of the vaccines they import. Training involves an intensive period of instruction, observation and practice audits in Massachusetts with follow-up site visits by training staff to assist in implementation.

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Maternal and Child Health Technical Assistance and Support Contract (TASC)

Cooperating Agency	Various (See Below)
Project Number	936-3096.02
IQC Number	HRN-I-00-98-00028-00 to HRN-I-00-98-00035-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: To support USAID Bureaus and Missions in the implementation of their Strategic Objectives pertaining to maternal health, child health and nutrition.

Description: TASC will provide Missions and Bureaus with long-term teams of resident advisors to help implement programs, short-term technical assistance, and/or support services in maternal health, child health and nutrition. TASC can support integrated MCH programs, beyond the scope of specialized Global activities.

As a Multicontractor Indefinite Quantity Contract (IQC), services will be provided to Missions by a pre-selected group of eight highly qualified cooperating agencies and their twenty-eight subcontractors, providing a wide range of state-of-the-art specialists and expertise. These cooperating agencies will respond to scopes of work developed by a Mission or Bureau, with award of each task order being made by their Contracting Officer, based on review of cost, proposed staff, and technical quality of the responses, as determined by the Mission.

Special Restrictions: This project cannot take Field Support funds.

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Micronutrient Global Leadership

Cooperating Agency	International Life Sciences Institute Research Foundation (ILSI)
Project Number	936-5122.07
Agreement Number	HRN-A-00-98-00027-00
Duration	10/98-9/03
Geographic Scope	Worldwide

Purpose: The Micronutrient Global Leadership Cooperative Agreement will provide scientific support to the leadership efforts of USAID to eliminate vitamin A deficiency and significantly reduce iron deficiency anemia.

Description: There are four components covered by the Micronutrient Global Leadership agreement. The first is the International Vitamin A Consultative Group (IVACG), which has been supported by USAID for 20 years. IVACG provides policy statements and state-of-the-art reviews of scientific questions of critical importance to the implementation of vitamin A deficiency control programs. IVACG also provides an exchange mechanism for scientific and programmatic information through its international meetings held every 18 months. The second component is the International Nutritional Anemia Consultative Group (INACG), which has also received support from USAID for 20 years. INACG provides policy guidance on issues critical to the implementation of iron deficiency anemia control programs. INACG is also involved in generating broad support for action by developing countries to control iron deficiency anemia. The third component is the VITA Global Alliance, a new approach to developing public-private partnerships to combat micronutrient malnutrition in developing countries. The private partners include U.S.-based and other food and ingredient companies, as well as nongovernmental organizations and civic groups. The final component is the use of expert panel consultations and targeted operational research to provide a better understanding of the factors that contribute to successful replication and expansion of micronutrient deficiency intervention programs.

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Micronutrient Operational Strategies and Technologies (MOST)

Cooperating Agency	International Science and Technology Institute (ISTI)
Project Number	936-3094.02
Agreement Number	HRN-A-00-98-00047-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: The Micronutrient Operational Strategies and Technologies (MOST) Cooperative Agreement has as its primary purpose expanded and enhanced delivery of micronutrients to vulnerable populations through supplementation and food-based strategies, including fortification and dietary diversification. MOST will provide leadership in elevating micronutrients on the global health agenda, strengthening policies and programs, and sharing lessons learned about the most cost-effective technologies and delivery systems for alleviating micronutrient deficiencies.

Description: Under its mandate as USAID's flagship micronutrient project and in support of USAID's Enhanced Vitamin A Effort (VITA), MOST seeks to establish and maintain vitamin A adequacy in vulnerable populations, particularly young children and their mothers, in 5-8 countries through a combination of supplementation and food-based approaches. MOST is also committed to reducing iron deficiency anemia by 30% in 5-8 countries and contributing to the reduction of iodine deficiency disorders in selected countries by 30%. MOST takes a comprehensive approach to micronutrient deficiency reduction, targeting not only improved supply and delivery of micronutrients, but also generating and sustaining greater consumer demand. Attention is given to optimizing the mix of interventions, depending on the prevalence, distribution, and severity of micronutrient deficiencies in a country, the level of sophistication of the country's existing micronutrient programs, and the human and financial resources available. MOST seeks to engage the private sector as a partner with government, especially the food industry, to expand coverage and to establish mechanisms for sustaining successful programs. Economic analyses, as well as program evaluation, will be applied to direct the evolution of the micronutrient policy and program mix in order to realize high coverage in an affordable manner over the long term.

Other Partners: ISTI's partners in the MOST include: Johns Hopkins University (JHU); Helen Keller International (HKI); the Academy for Educational Development (AED); the International Food Policy Research Institute; Cooperative for Assistance and Relief Everywhere (CARE); Save the Children; Program for Appropriate Technology in Health (PATH); Population Services International (PSI); and the International Executive Service Corps (IESC).

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Micronutrients for Health (JHU)

Cooperating Agency	Johns Hopkins University (JHU)
Project Number	936-5122.05
Agreement Number	HRN-A-00-97-00015-00
Duration	8/97-9/02
Geographic Scope	Worldwide

Purpose: The main purpose of the Micronutrients for Health Cooperative Agreement (MHCA) is to conduct policy- and program-oriented research, provide global scientific leadership and advocacy, and carry out technical assistance and training in micronutrient deficiency prevention.

Description: The MHCA addresses key questions related to micronutrient deficiency control through population-based research. The MHCA seeks to advance knowledge and overcome constraints to developing policies and guiding programs toward effective micronutrient deficiency prevention and control. The MHCA is managed by the Center for Human Nutrition, Johns Hopkins University School of Hygiene and Public Health. Activities under the MHCA are conducted by investigators with extensive research capabilities and experience in micronutrient nutrition (including laboratory sciences), epidemiology, biostatistics, anthropology, and communications. The team of investigators has a track record that has led to long-term, productive relationships with counterpart institutions in over a dozen countries in Asia, Africa and Latin America. The MHCA research agenda includes (1) investigating the extent, severity and public health consequences of micronutrient deficiencies in high-risk populations, especially with respect to vitamin A, iron and zinc; (2) identifying determinants of micronutrient deficiencies that are likely to be responsive to interventions; (3) developing new, practical, less expensive and valid methods for targeting high-risk groups, assessing micronutrient status and intake in the community that can be used for surveys, surveillance and program monitoring; and (4) developing single and coordinated multiple-micronutrient interventions and evaluating their efficacy, effectiveness, cost, and safety.

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Polio Eradication and Immunization Support

Cooperating Agency	UNICEF
Project Number	936-3080.01
Grant Number	AAG-G-00-97-00021-00
Duration	6/95-9/04
Geographic Scope	Worldwide

Purpose: To implement activities designed to improve child and maternal health worldwide, including: worldwide polio eradication efforts; improved immunization services; introduction of IMCI programs, support for micronutrient fortification and supplementation programs (specifically iodine and vitamin A); and monitoring progress towards the world summit for children goals.

Description: This grant funds several activities implemented through UNICEF's country, regional and headquarter offices in support of polio eradication, EPI, IMCI, micronutrient fortification, and maternal health. Funding these multiple components provides improved integration of service delivery.

The Polio Eradication component supports USAID's five-part strategy: 1) to building effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/management/logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination.

The EPI component supports routine immunization program strengthening through 1) planning and management of programmatic and financial resources to assure vaccines and equipment are available on a sustained bases; 2) improved quality and cost effectiveness of immunization services, e.g. IMCI, vitamin A, cold chain, integrated disease surveillance; 3) building effective partnerships to improve coordination and collaboration; and 4) monitoring and evaluation of results.

The Integrated Management of Childhood Illness (IMCI) component supports the introduction of the program through improving the performance of health workers through in-service and on-the-job training and through improvements in household and community preventive health practices.

The micronutrient fortification and supplementation component focuses on addressing the global goal of reducing micronutrient deficiencies worldwide. Current emphasis has been focused on eliminating iodine deficiencies by increasing iodized salt consumption in specific countries in East Asia and Africa.

The maternal health component supports strengthening UNICEF expertise and providing support such that high-level experts may effectively promote maternal and neonatal nutrition, health, and survival in UNICEF-assisted countries where maternal and neonatal mortality rates are high. Emphasis is placed on transfer of knowledge and expertise to UNICEF field programs, with particular focus on evidence-based interventions in maternal nutrition, antenatal care, skilled attendance at birth, treatment of obstetric complications, postpartum and newborn care.

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Polio Eradication and Immunization Support

Cooperating Agency	UNICEF
Project Number	936-3080.02
Grant Number	AAG-G-00-97-00020-00
Duration	6/95-9/04
Geographic Scope	Asia

Purpose: To implement activities to eradicate polio and improve immunization services in the Asia region.

Description: This grant supports activities implemented through UNICEF country offices, primarily India, in support of polio eradication in the context of strengthening immunization and disease control programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination.

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Polio Eradication and Immunization Support

Cooperating Agency	World Health Organization (WHO)
Project Number	936-3080.03
Grant Number	AAG-G-00-97-00019-00
Duration	6/95-9/04
Geographic Scope	Worldwide

Purpose: To implement activities to eradicate polio; improve immunization services; and improve disease surveillance.

Description: This grant supports activities implemented through WHO country offices, regional offices and headquarters in support of polio eradication in the context of strengthening immunization and disease control programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level and to support the polio laboratory network; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination, and progress towards certification.

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Polio Eradication and Immunization Support

Cooperating Agency	CORE Group (A consortium of NGOs working in Child Survival)
Project Number	936-3080.04
Agreement Number	HRN-A-00-98-00053-00
Duration	9/98-9/06
Geographic Scope	Africa, Asia, Central Asia, Eastern Europe, Near East

Purpose: To increase PVO participation in polio eradication, immunization and vitamin A activities and to improve case detection of acute flaccid paralysis (AFP) and other reportable diseases in underserved or hard to reach populations.

Description: The CORE group is a network of 35 US-based private voluntary organizations that have received funding from the USAID Bureau of Humanitarian Response's child survival grants in the past for improving maternal and child health in underserved populations. This agreement strengthens the network and builds upon ongoing field programs of CORE members. This grant supports: 1) the development of community-based case detection and reporting strategies for acute flaccid paralysis and other vaccine preventable diseases. These strategies will complement and enhance the facility-based approaches being developed by other implementing agencies; 2) the training and information dissemination about polio eradication and AFP/integrated disease case detection and reporting; 3) the participation of PVOs in interagency coordinating committees and subnational planning events; and 4) PVO participation in supplemental immunization activities (NIDs, SNIDs, mop-up). CORE members from any polio endemic or recently endemic country can request funding under this agreement (via the CORE central office). Requests for funding must be coordinated with the respective national polio program. Linkages between CORE members and with local PVOs are encouraged. The CORE central office will monitor and track PVO participation in polio eradication, develop a set of indicators to measure the contribution of PVOs towards this effort; and document and disseminate the lessons learned from polio eradication in order to strengthen routine EPI and other disease control efforts in the future. Over the life of the project, CORE will integrate vitamin A activities into country-specific efforts as part of their child survival programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for AFP and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level and to support the polio laboratory network; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination, and progress towards certification.

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Vaccine Endowment

Cooperating Agency	Ani & Narod Memorial Fund
Project Number	963-3096.08
Agreement Number	GPH-A-00-01-00018-00
Duration	Armenia
Geographic Scope	10/01-9/06

Purpose: an innovative public-private partnership model designed to explore an alternative approach to creating a sustainable financial source for childhood vaccines provided through National Immunization Programs.

Description: This activity is a community effort of the Armenian Diaspora to create an endowment that will ensure a reliable financial source for the vaccine provided through the Government of Armenia's National Immunization Program. The Ani & Narod Memorial Fund (ANMF) is spearheading a three-tier fundraising campaign targeted at the Armenian Diaspora and other donors. Given the small birth cohort in Armenia approximately \$1.4-1.6 million is needed for the endowment core, which will generate an annual income of approximately \$100,000. USAID/Yerevan and USAID/Washington have collectively contributed \$400,000. ANMF will be responsible for fundraising the matching contribution that will generate the annual income for the vaccine. ANMF is serving as a member of the Armenian Immunization Coordinating Committee and will be procuring vaccine through UNICEF in compliance with the Armenian National Immunization Plan.

This activity creates the opportunity to identify a model that:

- Addresses the gaps in financial support that occur from donor fatigue;
- Leverages funds, while releasing future USAID funds for other health activities;
- Creates a sustainable supply of vaccine to prevent childhood illness and death;
- Breaks the cycle of donor dependence;
- Uses UNICEF as a procurement agent to address concerns regarding quality assurance and delivery of vaccine; and
- Constitutes an innovative public-private partnership between USAID and a PVO, which explores a potentially replicable model to secure financial support for vaccines.

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Africa Integrated Malaria Initiative (AIMI)

Cooperating Agency	N/A
Project Number	936-3081
Agreement Number	Not applicable
Duration	9/96-9/02
Geographic Scope	Kenya, Malawi, Zambia, Benin

Purpose: In FY 1996, the Africa Integrated Malaria Initiative (AIMI) was authorized as a “shell project” (AIMI Project #936-3081) to receive funds from Missions and the USAID Africa Bureau to support AIMI activities, which in turn would be re-obligated through the current contracting mechanisms available to the Office of Health and Nutrition. AIMI is focused on sustained reduction in malaria-related illness and death. Several of the Office of Health and Nutrition’s field support projects- Partnerships for Health Reform/Health Policy/Systems Strengthening, Environmental Health Project, Maternal Neonatal Health, and Quality Assurance, as well as the Centers for Disease Control and Prevention, are part of the AIMI “package”.

Description: Through the *Africa Integrated Malaria Initiative* (AIMI), G/PHN/HN and its collaborating agencies, AFR/SD, CDC and select USAID missions have joined in partnership with African ministries of health, and local and U.S. PVOs/NGOs to strengthen the long-term prospects for sustainable and effective malaria control and prevention. AIMI is designed to enable health workers, mothers and home caretakers to manage and prevent malaria-related death and severe illness among children under the age of five years and pregnant women by promoting:

- Improved **management** of pediatric fever and anemia, by both the health worker at the **health facility** and mothers and other caretakers in the **home**;
- Improved access to and demand for malaria **prevention and treatment of pregnant women**;
- Increased demand for, access to, and appropriate use of affordable **insecticide treated materials**; and
- More **effective use of human and material resources** through improved collection and use of health and management information systems.

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Environmental Health Project (EHP II)

Cooperating Agency	Camp Dresser & McKee International
Project Number	936-5994.10
IQC Number	HRN-I-00-99-00011-00
Duration	6/99-6/04
Geographic Scope	Worldwide

Purpose: To reduce environmentally-related mortality and morbidity in both urban and rural settings.

Description: The Environmental Health Project (EHP) has two objectives. The principal objective is to reduce mortality and morbidity in children under five or associated with infectious diseases of major public health importance, by improving environmental conditions or reducing exposure to disease agents. The second is to provide diverse interests within USAID with access to a broad range of expertise in environmental health. EHP is implemented through an IQC awarded in June 1999. An initial Task Order with a \$20M ceiling was simultaneously awarded with the contract to support activities in community-based environmental health related to child survival (including sanitation, water supply, hygiene, indoor air pollution, and vector control) and for activities which relate environmental changes to vector-borne infectious disease outcomes (including surveillance and mapping of health, entomological, and other variables leading to improved malaria prevention and control programs). Missions and Bureaus can request assistance under Task Order #1 to achieve results consistent with this scope of work. Other services can be obtained through separate task orders to the IQC.

Subcontractors: Associates in Rural Development (ARD); International Science and Technology Institute (ISTI); John Snow, Inc. (JSI); The Manoff Group; Research Triangle Institute (RTI); Training Resources Group (TRG); and Tulane University School of Public Health.

Note: Field Support funds can be directed to task order #1 for activities consistent with the scope of work of this task order.

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Vulnerable Children and War Victims Results Package: Displaced Children and Orphans Fund

Cooperating Agency	N/A
Project Number	936-3102
Agreement Number	N/A
Duration	N/A
Geographic Scope	Worldwide

Purpose: The Displaced Children and Orphans Fund (DCOF) provides financial and technical assistance for community-based programs that assist vulnerable children who are separated or orphaned and without parental or adult supervision.

Description: This fund is coordinated and supported by the Office of Health and Nutrition, although most activities are implemented through USAID Mission - managed grants and agreements.

The major portion of these funds are used to support programs activities and provide technical assistance for three categories of children who are at “extreme risk,” including street children, war-affected children and children affected by HIV/AIDS.

DCOF currently supports programs in sixteen countries.

As part of its oversight and managerial responsibilities for the Fund G/PHN/HN maintains a technical assistance contract with the Professional Resource Group International, Inc. (PRGI). This contract provides technical assistance and support for field missions that are interested in developing or are actively managing field activities under the Fund.

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Health Resources Support II: Office of International and Refugee Health/DHHS

Cooperating Agency	Office of International and Refugee Health (OIRH), Department of Health and Human Services (DHHS)
Project Number	936-6004.01
Agreement Number	HRN-P-HI-92-00057-00
Duration	9/93-9/02
Geographic Scope	Worldwide

Purpose: To improve the design, coordination, implementation, management, and evaluation of health, child survival, HIV/AIDS, and other related projects and programs in developing countries.

Description: This PASA provides a fast-turn-around mechanism that enables USAID field missions and local governments to access specialized, short-term assistance and expertise from the various member agencies of the Department of Health and Human Services (DHHS).

The Health PASA has been a responsive mechanism to accessing DHHS expertise to assist in various disease outbreaks around the world. During the life of this PASA, DHHS has assisted ministries of health in every region of the world with various disease outbreaks. This assistance brings state-of-the-art surveillance techniques, laboratory testing methods, treatment modalities, and prevention and control methods to ministry of health staff dealing with these unexpected epidemics.

The PASA also provides for proposal reviews dealing with child survival and other technical assistance as needed.

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Vulnerable Children and War Victims Results Package: The Patrick J. Leahy War Victims Fund

Cooperating Agency	N/A
Project Number	936-3102
Agreement Number	N/A
Duration	N/A
Geographic Scope	Worldwide

Purpose: The Patrick J. Leahy War Victims Fund (LWVF) primarily provides assistance to programs that address the needs of civilians who suffer from physical disabilities as a result of war, including amputees who have lost limbs as a result of landmine accidents.

Description: The LWVF is mainly concerned with the provision of orthopedic services and devices to ensure unassisted mobility for civilian war victims. Assistance includes training and institutional capacity strengthening, facilities upgrading, materials provision, and support for national disabilities policy reform and public advocacy. In addition, programs include support for the social and economic reintegration of these survivors.

This fund is coordinated and supported by the Office of Health and Nutrition, although most activities are implemented through grants and agreements that are managed by USAID Missions.

The LWVF currently supports program activities in 12 countries.

As part of its oversight and managerial responsibilities for the Fund G/PHN/HN maintains a technical assistance contract with the Professional Resource Group International, Inc. (PRGI). This contract provides technical assistance and support for field missions that are interested in developing or are actively managing field activities under the Fund.

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Infectious Diseases Results Package: Centers for Disease Control and Prevention IAA

Cooperating Agency	Centers for Disease Control and Prevention (CDC)
Project Number	936-3100.01
Agreement Number	AAG-P-00-99-00006-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To strengthen the delivery of infectious disease and other health programs in developing countries by accessing technical expertise from the Centers for Disease Control and Prevention and collaborating with the CDC to address infectious disease and other health problems in the developing world.

Description: The umbrella interagency agreement with CDC allows USAID to access technical expertise from CDC and is a world-renowned source of specialized technical experience and expertise in the international health field. The IAA supports activities in control and prevention of infectious diseases including tuberculosis, malaria, disease surveillance and antimicrobial resistance; HIV/AIDS; and environmental health.

Specific workplans are developed with appropriate centers or divisions within CDC and activities take the form of linked series of consultancies or long term technical assistance. Activities include:

1. Technical and program support for the development and implementation of appropriate global/regional/country-level health programs and strategies;
2. Monitoring and evaluation of global/regional/country-level health activities, projects and programs; and
3. Studies, assessments, evaluation and other research activities to assist in policy dialogue, planning and formulating health programs.

Missions can access the IAA through field support for either short or long term technical assistance.

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Infectious Diseases Results Package: NIH - Tuberculosis Research and Training

Cooperating Agency	National Institutes of Health (NIH)
Project Number	936-3100.03
Agreement Number	AAG-P-00-99-00004-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To allow USAID to access Fogarty International Center (FIC) experts to train future public health and research world leaders needed to confront the global TB epidemic and to establish or strengthen model TB clinical research, treatment, and prevention centers in participating collaborating countries necessary to control the TB epidemic.

Description: The FIC fosters research partnerships between US scientists and foreign counterparts through fellowships and exchange awards and international agreements, to meet new and emerging global health challenges and human resource needs. Specifically, this IAA will help build global health research and public health capacity to better respond to the threat posed by TB in general and multi-drug resistant TB (MDRB) in particular. This capacity building effort includes:

- Strengthening laboratory infrastructure in support of future TB surveillance and research
- Building public health capabilities in support of surveillance and clinical trials of promising new TB interventions and therapies, and
- Enhancing the capabilities of developing countries to properly manage TB programs and to conduct operational research related to TB prevention and control.

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Infectious Diseases Results Package: World Health Organization Umbrella Grant

Cooperating Agency	World Health Organization (WHO)
Project Number	936-3100.02
Grant Number	AAG-G-00-99-00005-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: This grant provides support to the World Health Organization to carry out collaborative activities with USAID in infectious diseases, maternal and child health and HIV/AIDS.

Description: The umbrella grant to WHO consolidates most of the Office of Health and Nutrition's agreements with WHO under a simplified mechanism. The grant supports broad USAID-WHO collaborations in tuberculosis, malaria and other vector borne diseases (e.g., dengue), disease surveillance, antimicrobial resistance, and HIV/AIDS -- at WHO headquarters in Geneva as well as at regional and country offices.

Specifically, support is provided to WHO's relevant technical and program divisions for technical input and assistance in the development, implementation and/or evaluation of health programs and studies including:

- global strategy development;
- technical analyses;
- demonstration activities and feasibility studies;
- capacity building;
- policy reform;
- project evaluation and assessments;
- monitoring and evaluation;
- workshops and conferences;
- education/information strategies.

Missions can access WHO technical expertise via field support.

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Malaria Vaccine Development Program (MVDP)

Cooperating Agency	Various
Project Number	936-6001
Contract Number	Various
Duration	5/92-4/02
Geographic Scope	Worldwide

Purpose: To develop vaccines that will reduce malaria-associated mortality and morbidity in developing countries, especially in children.

Description: The MVDP focuses on addressing the major rate limiting step in malaria vaccine development: the translation of promising laboratory findings into vaccines that can be evaluated in humans. To accomplish this, the program supports the:

- scaled-up production of laboratory constructs;
- manufacture of pilot lots of vaccines for evaluation in humans;
- conduct of preclinical studies;
- application to the Food and Drug Administration for approval to conduct clinical trials;
- conduct of clinical trials; and
- conduct of field trials.

These capabilities are available to the MVDP through agreements with other domestic agencies (National Institutes of Health, Centers for Disease Control and Prevention, and the Department of Defense) and international groups involved in the development of malaria vaccines (Commission of European Communities and the World Health Organization Special Programme for Research and Training in Tropical Disease Research).

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NetMark

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-5994.09
Agreement Number	HRN-A-00-99-00016-00
Duration	9/99-9/04
Geographic Scope	Africa Region

Purpose: NetMark is a five-year, Africa regional competitive award focused on achieving economically and socially sustainable promotion and delivery of effective insecticide treated materials (ITM), such as bednets. To achieve this goal NetMark will focus on strengthening the capacity of the commercial sector, in partnership with the public health sector, to promote the appropriate use and distribution of netting and insecticides.

Description: NetMark is an exciting and innovative approach to building public-private partnership for the promotion of a commercially sustainable market for bednets and other insecticide-treated netting for the prevention of malaria. At the heart of NetMark is the partnering of USAID with SC Johnson, a \$5 billion/year U.S. company that is a global leader in the marketing of consumer products for insect control (e.g. Raid!, OFF!). Under this partnership, SC Johnson has committed itself to using its own financial resources to procure and package netting and insecticide and distribute through local commercial channels. USAID will focus the use of its resources on building demand for ITMs and promoting appropriate behaviors for their use. The combining of USAID and SC Johnson resources is of great mutual benefit: SC Johnson's commercial clout greatly expands NetMark's market reach, and USAID's investment to create market demand provides commercial partners, such as SC Johnson, with the necessary "push" to commit itself to the long-term marketing of ITMs.

The partnering with a commercial entity such as SC Johnson clearly distinguishes NetMark from traditional social marketers for ITMs- who largely rely on donor subsidization for their operations. NetMark is committed to opening the commercial market to ITMs and as such is more of a catalytic, time-limited investment. We are currently estimating that at the end of the five-year life of NetMark, more than two million nets and four million insecticide treatments will be procured and sold by SC Johnson in each "NetMark Country"- and a thriving commercial capacity to expand the delivery of these services will be in place and able to operate without further USAID support.

Partners: SC Johnson.

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Onchocerciasis Control Program (OCP)

Cooperating Agency	World Bank
Project Number	698-0485.01
Grant Number	AAG-G-00-97-00025-00
Duration	9/92-12/02
Geographic Scope	Africa Region

Purpose: The Onchocerciasis Control Program was authorized on September 17, 1992, to provide the U.S. financial contribution to the World Bank Onchocerciasis Trust Fund for the West Africa Onchocerciasis Control Programme (OCP); and amended in 1996 to allow contributions to the Fund to be used to support the newly formed Africa Programme for Onchocerciasis Control (APOC), a 16 country program to extend onchocerciasis control to oncho-endemic countries not covered by the West African Onchocerciasis Control Program (OCP).

Description: USAID's onchocerciasis project is expected to achieve the following kinds of results:

- transfer to national programs within the OCP the capacity for continued delivery of ivermectin through community-based approaches by 2002;
- strengthening the epidemiological evaluation and surveillance capacity of OCP member states to detect and control recrudescence, and where needed maintaining effective vector control operations;
- elimination of onchocerciasis-related blindness from the approximately 16 APOC African countries where the diseases is still a major public health problem;
- building sustainable community-based systems capable of annual delivery of ivermectin.
- establishment of effective collaborations between non-governmental organizations and national ministries of health in the planning and implementation of local ivermectin delivery programs.

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Tuberculosis Coalition For Technical Assistance (TBCTA)

Cooperating Agency	Royal Netherlands Tuberculosis Association (KNCV) and other coalition members
Project Number	936-3100.05
Grant Number	HRN-A-00-00-00018
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: Improve and expand the capacity of USAID to respond to the Global TB epidemic by providing state-of-the-art context appropriate, technically sound and cost-effective consultation and technical assistance to high-incidence countries and USAID missions.

Description: The TB Coalition is a unique partnership of six of the leading international NGOs and organizations involved in global TB control. The Coalition includes: the Royal Netherlands Tuberculosis Association (KNCV); the International Union Against TB and Lung Disease (IUATLD); the American Lung Association (ALA); the American Thoracic Society (ATS); the Centers for Disease Control and Prevention (CDC); and the World Health Organization (WHO). KNCV, as the signatory organization, will be responsible for day-to-day management and will be directly responsible to USAID.

To assist USAID and its local (public, private, NGO) partners to improve TB control programs and accelerate the implementation of the Directly Observed Treatment Short Course (DOTS) strategy, the TB Coalition will help accelerate implementation and expansion of DOTS in developing countries; develop institutional and technical capacity for TB control; integrate TB control efforts within primary health care services more effectively; develop or strengthen linkages between TB control programs and HIV/AIDS prevention and treatment programs, and multi-drug resistance (MDR) efforts; and expand the capacity for providing high quality technical assistance worldwide by organizing training for and access to qualified consultants.

Examples of activities undertaken by the TB Coalition include: assessments, assistance with program and project development, training and workshops, support for intra- and inter-country meetings, program review missions, and consensus building meetings.

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Applied Research in Child Survival Services: Quality Assurance II

Cooperating Agency	Center for Human Services
Project Number	936-5992.02
Contract Number	HRN-C-00-96-90013-00
Duration	9/96-6/02
Geographic Scope	Worldwide

Purpose: To support the effective use of modern quality assurance (QA) approaches in developing country health systems and to support the institutionalization of the quality improvement process through organized QA programs.

Description: Quality of care can be defined as the degree to which the care actually delivered matches previously-defined standards. In this view, quality is an objectively measurable property of health services. Both clinical and non-clinical support services supported by USAID are highly amenable to such standards. However, assessments have consistently shown that the actual care provided in developing country programs falls far short of the programs' own standards, undermining the impact of training and other inputs. A wide range of QA tools, largely drawn from US experience, has been adapted to developing countries' needs and is available to address quality issues. These techniques have proven effective in settings ranging from rural Niger to urban Poland, where ordinary health workers have learned to use simple analytical tools to study and improve their own performance based on data they collect themselves. Major areas of assistance include: 1) long-term assistance to institutionalize QA programs; 2) assistance to other CAs and NGOs; 3) quality assessments and project design; 4) evaluation of QA programs; 5) quality-related training; 6) accreditation, licensing, and certification; and 7) applied research addressing issues such as computer-based training, incentive systems, patient satisfaction, developing effective standards, and counseling.

Subcontractors: Joint Commission International; Johns Hopkins University School of Public Health; Johns Hopkins University Center for Communication Programs (JHU/CCP); and JHPIEGO Corporation.

Special Restrictions: This contract does not fund procurement of program commodities.

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Data for Decision Making II: Global Health Council

Cooperating Agency	Global Health Council
Project Number	936-3098.02
Agreement Number	HRN-A-00-99-00018-00
Duration	8/99-8/04
Geographic Scope	Worldwide

Purpose: The Global Health Council, formerly the National Council for International Health, is the primary information and outreach group providing broad representation for all international health issues of greatest importance to USAID. The purpose of this cooperative agreement is to support the overall objectives of the Global Health Council with specific support for information and capacity-building activities.

Description: The Council's key areas of institutional focus are to inform and educate the American public, practitioners, and political and technical decision makers engaged in delivering health and population programs around the world, and to serve as a leading forum for the exchange of information on best practices and access to technical training assistance and information.

During this five-year cooperative agreement, USAID will support the Council's efforts in organizing and completing the following activities:

- Local - global health forums
- Special events
- Congressional educational/technical briefings
- Regional forums
- Technical workshops
- The Annual International Health Conference

In addition, the Council will establish:

- A global health database
- A pilot Global Health Council affiliate

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Data for Decision Making II: Population, Health and Nutrition Information (PHNI)

Cooperating Agency	Jorge Scientific Corporation
Project Number	936-3098.01
Contract Number	HRN-C-00-00004-00
Duration	4/00-4/05
Geographic Scope	Worldwide

Purpose: To provide population, health and nutrition technical teams in USAID, other agencies and developing countries with essential information on program needs, technologies, costs, and impacts to support accurate priority-setting, design, management, and evaluation of country programs.

Description: PHNI has technical expertise in three interrelated areas: information technology (IT), technical analysis, and communication.

The IT Unit provides comprehensive, state-of-the art IT solutions through supporting and developing IT systems that are easy to use and understand. The primary foci are on providing applications, databases, and web-based development, while also providing support services that include network administration, hardware support, website hosting, software training, and data administration. Through the IT unit, PHN staff will have ready access to critical information that is needed to plan and carry out programmatic mandates.

The Analysis Unit provides assistance to PHN technical staff in analyzing and presenting econdary data from a variety of sources such as DHS, WHO, UNICEF, in all of the PHN objective areas, including population, child survival, nutrition, HIV/AIDS, and infectious diseases. Additionally, data on indicators and financial trends are maintained to support USAID in reviewing program impacts and monitoring performance. PHNI analysts carefully review data to ensure quality, ensure data are current, and provide further support to G/PHN through technical and analytical reporting, including annual reports to Congress.

Using the information available through the IT and Analysis Units, and elsewhere, the Communications Unit will support USAID by effectively communicating PHN issues to various target audiences through the strategic development and production of materials for broad distribution. The Communication Unit can help Global/PHN staff to design communication approaches and reach defined audiences - including Congress, other primary constituencies, and the general public - through various channels and materials including reports, multimedia presentation, briefings, pictorial display, conferences (e.g., APHA), and community outreach.

Subcontractors: The Futures Group International (FUTURES) of Washington, D.C. and John Snow, Inc. (JSI) of Boston, MA.

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Partners for Health Reform *plus* (PHR*plus*)

Cooperating Agency	Abt Associates, Inc.
Project Number	936-3104.01
Contract Number	HRN-C-00-00019-00
Duration	10/00-09/05
Geographic Scope	Worldwide

Purpose: To improve the design and implementation of health policy and systems innovations so that they contribute to improved health system performance in delivering PHN priority interventions; to improve global understanding of the elements of health policy and systems development that foster improved performance in delivering PHN priority interventions.

Description: The project is the principal USAID technical service resource in health policy and systems strengthening. As the flagship project in this field, PHR*plus* provides technical assistance in health system organization, health financing, health information (including National Health Accounts), and disease surveillance. PHR*plus* also provides limited technical assistance in health worker service quality and commodities. Technical assistance focuses on developing strategies, increasing stakeholder participation, building consensus, undertaking feasibility studies, developing and carrying out implementation plans, training, capacity building, monitoring and evaluation, research and information dissemination.

Subcontractors: University Research Corporation (URC), Program for Appropriate Technology in Health (PATH), Emory University Rollins School of Public Health, Tulane University School of Public Health and Tropical Medicine, Development Associates (DA), Social Sectors Development Strategies (SSDS), SAG Corporation, Training Resources Group (TRG) and Philoxenia International Travel.

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Infectious Diseases Results Package: Centers for Disease Control (CDC)/Infotech

Cooperating Agency	Centers for Disease Control and Prevention (CDC)
Project Number	936-3100
Agreement Number	AAG-P-00-99-00006
Duration	09/99-09/04
Geographic Scope	Worldwide

Purpose: To work with host country technicians to improve the quality and accessibility of health information.

Description: The project develops and tests approaches to increase data-based decision making for setting public health policies and for planning, managing, and evaluating programs. The project increases the abilities of decision makers (at policy and program levels, especially at the district level in decentralized health systems) to articulate problems and information needs. Epidemiologic and other information is used to set policies and health priorities, plan programs, implement cost-effective interventions, and evaluate prevention and control efforts.

Note: This project is the continuation of project 936-5991.02, Agreement number DPE-5991-X-HC-1038-00.

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Monitoring, Evaluation, and Design/Assessment Support (MEDS)

Cooperating Agency	LTG Associates, Inc.
Project Number	936-3096.03
IQC Number	HRN-I-00-99-00002-00
Duration	1/99-1/04
Geographic Scope	Worldwide

Purpose: The Monitoring, Evaluation, and Design/Assessment Support (MEDS) activity will assist Missions and Bureaus in designing, assessing, and evaluating maternal and child health and nutrition programs. MEDS will also provide expert assistance in development of monitoring and evaluation frameworks, plans, and procedures (including identification of appropriate indicators and measurement methods) for Missions, and in designing and carrying out holistic evaluations of field programs in maternal and child health and nutrition.

Description: MEDS will be a Single Contractor Indefinite Quantity Contract (IQC). The contractor will not be involved with program implementation to avoid organizational conflict of interest. Specific tasks will include: systematic assessments, design of results frameworks, evaluations, lessons learned, support for technical meetings, project monitoring and analysis, proposal reviews, information dissemination, and literature reviews. MEDS will also serve as the secretariat for strategic and technical expert advisory groups. Missions and Bureaus are welcome to issue task orders to MEDS. Missions and Bureaus wishing to access MEDS by using field support funds are requested to contact the CTO. These requests will be considered on a case by case basis.

Subcontractor: TvT Associates, Inc.

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Quality Assurance/Human Resources Management

Cooperating Agency	TBD
Project Number	936-3104.05
Agreement Number	new award estimated for April, 2002
Duration	04/02-04/08
Geographic Scope	Worldwide

Purpose: To improve the capacity of health programs to achieve higher levels of quality and efficiency. Like the earlier Quality Assurance II, the QA/HRM Project adapts a wide range of approaches from the field of modern quality assurance (QA) for use in developing and middle income countries. The project also addresses issues related to the management of human resources that have an impact on quality of care.

Description: Most USAID priority services such as child health, essential obstetrical care, malaria and tuberculosis case management, HIV/AIDS-related care, and reproductive health, involve provider compliance with evidence-based guidelines. Training is a necessary but insufficient strategy for promoting high levels of compliance. Further, health systems generally have not developed effective administrative mechanisms to support services that follow such guidelines. To address these issues, the project offers specialized expertise in seven major QA strategies:

- Development of more effective guidelines, addressing feasibility and provider acceptance, as well as evidence
- Systems for monitoring quality of care, as an integral part of service delivery
- Strategies for directly promoting compliance with guidelines, including QA approaches to strengthen traditional training and supervision, and other strategies to complement these systems
- Problem solving, including the quality improvement methodology used in US medical centers, and a range of simpler generic problem solving techniques
- Re-design of health services, a systematic approach to assure that administrative procedures support rather than hinder the quality and efficiency of care
- Promoting quality in the private sector, adapting well-established strategies from developed countries, such as certification of specialty training, accreditation of facilities and training programs, licensing, and insurance reimbursement
- Expanding the evidence base for human resources management, to provide a stronger argument for improving practices in this critical but politically sensitive element of health systems.

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Rational Pharmaceutical Management Plus (RPM Plus)

Cooperating Agency	Management Sciences for Health (MSH)
Project Number	936-3104.02
Agreement Number	HRN-A-00-00-00016-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: To improve the availability of health commodities (pharmaceuticals, vaccines, supplies and equipment) of assured quality for PHN priority interventions, and promote their appropriate use in both the public and private sectors. As the primary G/PHN mechanism for commodity management systems strengthening, the RPM Plus mandate is to provide technical leadership to global initiatives such as Stop TB and Roll Back Malaria; develop and apply new, specialized tools as required to generate needed commodity-related information and improve decision making processes; actively foster operational donor coordination and strategic planning globally and at the country level to improve product availability; monitor and assess the impact of reform initiatives on access to and availability and use of essential health commodities for PHN priority interventions; and identify lessons-learned, formulate guiding principals and disseminate best practices and approaches in commodity management under health sector reform.

Description: RPM Plus will introduce sustainable reforms in commodity management systems and improve the availability and use of health commodities by:

- Employing state of the art diagnostic assessment methods to determine the root causes and factors contributing to poor availability and irrational use of commodities;
- Reducing financial waste and maximizing the allocation and use of existing resources;
- Promoting appropriate government policies and regulations to help assure product quality;
- Increasing overall commodity management capacity regionally, and at the national, decentralized or integrated levels of health care systems;
- Designing national strategies and intervention packages to slow the emergence and spread of Antimicrobial resistance;
- sourcing or privatization of selected drug management functions (e.g., warehousing, distribution);
- Addressing the commodity management issues of HIV/AIDS and Infectious Diseases (malaria and TB) programs and the implementation problems involved in scaling-up;
- Enhancing financing mechanisms (e.g., pharmacy benefits management, revolving drug funds) and leveraging resources from foundations and donors for commodities;
- Improving commodity selection and quantification for PHN priority interventions;
- Promoting transparent, accountable and efficient procurement policies and practices; and
- Improving drug use practices on both the demand (e.g., patient drug seeking behavior) and supply sides (e.g., providers and dispensers), including drug sellers and commercial sales.

Subrecipients: Academy for Educational Development (AED), Alliance for the Prudent Use of Antibiotics (APUA), Boston University, Harvard University, Health and Development Service (HANDS), Program for Appropriate Technology in Health (PATH), and University of Newcastle.

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U.S. Pharmacopeia Drug Quality and Information (USPDQI)

Cooperating Agency	United States Pharmacopeia
Project Number	936-3104.03
Agreement Number	HRN-A-00-00-00017-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: USPDQI contributes to effective drug and commodity regulatory approaches and policies; enhanced methods for drug quality assurance; increased access to unbiased drug and therapeutics information; and improved prescribing, dispensing, and patient compliance with treatment regimens.

Description: USPDQI can improve drug quality assurance and promote the appropriate use of medicines by:

- Developing drug and therapeutics information to support PHN Strategic Objectives. Under the previous RPM program, USP developed information packages on polio, OPV and misconceptions about immunizations, antimicrobial resistance, *misoprostol* for postpartum hemorrhage, and fixed-dose combination drugs for malaria prevention and treatment;
- Introducing the use of authoritative standards for drug quality, strength, purity and packaging and appropriate testing methods to detect counterfeit and sub-standard products;
- Assessing and upgrading quality control laboratories, including staff training as required;
- Conducting technical reviews of the quality of pharmaceutical information sources;
- Building local capacity to develop and disseminate locally relevant drug and therapeutics information and to establish national and regional drug information networks;
- Developing drug information tailored to suit local conditions and meet the needs of target audiences (e.g., patients and consumers, regulators, health care professionals, NGOs);
- Improving dispensing practices of private sector drug retailers and supporting the establishment of minimal criteria for accreditation and licensing;
- Contributing to medical textbooks, continuing education, distance-learning packages and technical update training (e.g., to improve prescribing of antimicrobial agents); and
- Supporting drug policy development and strengthening regulatory authorities, through workshops, provision of information on drugs for Essential Drugs Lists and formularies and technical assistance by USP expert committees and the FDA.

USP standards of drug strength, quality, purity, packaging and labeling have been recognized by the U.S. Congress since 1848 and are enforceable by the U.S. Food and Drug Administration (FDA). USP drug information on indications, precautions, interactions and side effects is widely recognized as an authoritative, up-to-date, and unbiased source of information for health care professionals and patients.

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WHO Strengthening of Health Services (SHS)

Cooperating Agency	World Health Organization (WHO)
Project Number	936-5994.07
Grant Number	AAG-G-00-98-00008
Duration	09/98-09/04
Geographic Scope	Worldwide

Purpose: To support the design, implementation, and management of health sector reforms in developing countries by supporting analyses of the generation, allocation, and management of financial resources for health.

Description: This grant supports policy-relevant information by focusing on four key strategies: 1) policy analysis; 2) information support and dissemination; 3) training support; and 4) advocacy and coordination with other units within WHO and with other multi-lateral and bilateral agencies. It is expected that the outcomes of the program will encourage countries to include economic considerations in their national health sector reforms and will improve resource use by health managers.

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AIDS Social Marketing (AIDSMark)

Cooperating Agency	Population Services International (PSI)
Project Number	936-3090.03
Agreement Number	HRN-A-00-97-00021-00
Duration	9/97-9/02
Geographic Scope	Worldwide

Purpose: The AIDSMark program is designed to implement HIV/AIDS prevention and mitigation social marketing interventions worldwide for USAID, both on a regional and country-specific basis. AIDSMark social markets essential health products and services and also develops and disseminates messages and concepts relating to behavior change.

Description: AIDSMark supports the Global Bureau's Population, Health and Nutrition (G/PHN) six intermediate results (IRs) under USAID's Strategic Objective (SO) 4. The AIDSMark contribution consists of 1) enhanced and expanded social marketing of barrier methods; 2) social marketing applied to STI management and prevention worldwide; 3) effective advocacy for contextual changes as a result of and in favor of social marketing; 4) strengthened and expanded private sector involvement in STI/HIV social marketing projects; 5) increased availability and use of information on the effectiveness of social marketing for STI/HIV prevention and management; and 6) worldwide leadership in social marketing for STI/HIV prevention and management.

Subgrantees: Family Health International (FHI); Program for Appropriate Technology in Health (PATH); Management Sciences for Health (MSH); International Center for Research on Women (ICRW); International Planned Parenthood Federation (IPPF); and DKT International.

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Community REACH

Cooperating Agency	Pact, Inc
Project Number	936-3090.124
Agreement Number	GPH-A-00-01-00007-00
Duration	9/01-9/06
Geographic Scope	Worldwide

Purpose: Under this Leader with Associate cooperate agreement, Community REACH (*Rapid and Effective Action Combating HIV/AIDS*), the program is designed to: (1) quickly mobilize funding to organizations playing valuable roles in the fight against HIV/AIDS, including U.S. and non-U.S. based PVOs, regional and local NGOs, universities, and faith-based organizations; (2) quickly respond to immediate and longer term Mission and Bureau needs consistent with USAID's goals of "increased use of improved, effective and sustainable responses to reduce HIV transmission and to mitigate the impact of the HIV/AIDS pandemic."

The LWA mechanism differs from traditional USAID agreements by virtue of its flexibility. It opens a new avenue for the participation of Missions and Bureaus by allowing them to create additional cooperative agreements or grants known as Associate Awards. Associate awards may be issued until but not after the Leader award expires; they do not have to end concurrently with the Leader award and therefore can extend beyond the Leader.

Description: Community REACH is an umbrella grants making and grants management program supporting HIV/AIDS activities in the following areas: primary prevention and education; voluntary counseling and testing; and care and support for those living with and affected by HIV or AIDS.

Leader (Bureau for Global Health core-funded): To distribute funds, Pact will issue approximately two to three request for applications a year. Each solicitation for sub-grants will vary in terms of the programmatic focus under the three broad areas. The first solicitation funded community- and home-based HIV/AIDS care and support activities in the Rapid Scale Up and Intensive Focus Countries designated by USAID. The REACH team and BGH will work jointly to determine the geographical and programmatic focus of future solicitations with input from Missions.. Grants will be awarded to PVOs and NGOs in amounts starting at \$100,000 for periods of up to three years, depending on funds availability, with unlimited potential for cost sharing from other sources.

Associate (Mission-funded): The Associate awards allow Missions/Bureaus to use the Leader to issue a separate agreement with Pact to more directly support Missions/Bureau-specific HIV/AIDS program needs. The LWA authorizes Missions/Bureaus to issue an award directly with Pact without further competition. For example, a Missions/Bureau interested in developing a grant-making program for HIV/AIDS activities can tap into Community REACH to establish a national-level umbrella grant-making program. PACT, in turn, will be responsible for competition or exceptions for competition for sub-grants at the field level. Local offices of PACT and FUTURES are not eligible to receive sub-grants under Associate Awards. Under these awards, Missions are expected to completely cover PACT administration costs and fees.

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Global Health Council

Cooperating Agency	Global Health Council
Project Number	936-3098.02
Agreement Number	HRN-A-00-99-00018-00
Duration	8/99-7/04
Geographic Scope	Worldwide

Purpose: Under this cooperative agreement, the Global Health Council (GHC) will perform a key role in supporting the capacity of PVOs and NGOs in implementing USAID-sponsored HIV/AIDS activities. Through its Global AIDS Program, the Global Health Council acts as liaison, educator, and coalition builder for U.S. and indigenous private sector entities working in HIV/AIDS as well as serving as a source of varied and up-to-date information on the global AIDS pandemic.

Description: The Global Health Council Global AIDS Program keeps an expansive database of NGOs from around the world that work in HIV/AIDS activities, and provides information on these NGOs to interested parties, with the goal of networking and alliance building. The Global Health Council also provides support to international and regional networks of NGOs. The Global Health Council provides seminars, workshops, and special events that build awareness of the global AIDS pandemic in the United States. Through publication of its bimonthly newsletter, *AIDSLINK*, the Global Health Council provides news on the global AIDS pandemic, and publishes and disseminates lessons learned in programs of USAID funded cooperating agencies and other partner NGOs. The Global Health Council also acts as the linking partner between the U.S. global response to AIDS and the work of AIDS service organizations in the United States.

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HIV Operations Research (HORIZONS)

Cooperating Agency	Population Council
Project Number	936-3090.01
Agreement Number	HRN-A-00-97-00012-00
Duration	8/97-7/02
Geographic Scope	Worldwide

Purpose: Under a five-year Cooperative Agreement from the U.S. Agency for International Development, the Population Council and its partner organizations of U.S.-based and international organizations will conduct operations research (OR) to develop and identify best practices for the prevention of HIV/AIDS and other sexually transmitted diseases.

Description: HORIZONS will feature practical, field-based, program-oriented operations research. The overall research outcome will be the identification of “best practices” for: 1) reducing the risk of acquiring HIV; 2) preventing and managing sexually transmitted infections; 3) implementing strategies for policy analysis and advocacy; 4) providing effective and efficient care and support services for persons infected with or directly affected by HIV/AIDS; 5) ensuring effective community participation; and 6) expanding and enhancing the integration of STI/HIV services into existing maternal and child health, and family planning programs.

Subgrantees: Program for Appropriate Technology in Health (PATH); International Center for Research on Women (ICRW); International HIV/AIDS Alliance (London-based); the University of Alabama at Birmingham; and Tulane University.

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Implementing AIDS Prevention and Control Activities (IMPACT)

Cooperating Agency	Family Health International (FHI)
Project Number	936-3090.02
Agreement Number	HRN-A-00-97-00017-00
Duration	9/97-9/02
Geographic Scope	Worldwide

Purpose: Family Health International was awarded this cooperative agreement for the design, development, management, monitoring and technical support to regional and/or country specific HIV/AIDS program interventions. This project builds on over fifteen years of experience by the FHI team in program design, management and evaluation of HIV/AIDS programs in developing countries.

Description: Working under the HIV/AIDS Global Bureau's Strategic Objective Four, FHI and its partner organizations are available to assist Missions and regional Bureaus in implementing programs that result in reduced sexual risk of HIV acquisition, improved STI prevention and management, MTCT, minimizing contextual and policy constraints, promoting comprehensive care and support programs, increased effective linkages between prevention and care, and improved program monitoring and evaluation.

Subgrantees: Population Services International (PSI); Program for Appropriate Technology in Health (PATH); Management Sciences for Health (MSH); Institute of Tropical Medicine (ITM); and University of North Carolina (UNC).

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International HIV/AIDS Alliance

Cooperating Agency	International HIV/AIDS Alliance
Project Number	936-3090.07
Grant Number	HRN-G-00-98-00010-00
Duration	1/98-09/07
Geographic Scope	Worldwide

Purpose: Under this grant, the International HIV/AIDS Alliance will continue to mobilize indigenous NGOs and CBOs to respond to AIDS; improve the quality of their work; build capacity of local service organizations and technical support providers, and; document and share lessons about community mobilization and NGO capacity building.

Description: The Alliance will continue its already successful work in promoting the integration of HIV and STD work into other community development initiatives, linking prevention and care, and promoting partnerships among local NGOs and between NGOs and government services. The Alliance's national or sub-national level capacity building emphasizes the development of sustainable local NGO support organizations with functions including local and international resource mobilization, technical support in local languages, monitoring, evaluation and NGO sector policy leadership. The Alliance may be particularly useful to Missions and regional Bureaus that wish to mobilize and strengthen community responses in countries on the frontiers of the HIV epidemic, where there is not yet strong local capacity; to involve local health and development NGOs that are not yet responding to AIDS; to ensure coordination with other major bilateral and multilateral donors; to organize South-South technical support, to build a sustainable locally governed infrastructure to mobilize and support NGOs in an ongoing manner.

The International HIV/AIDS Alliance has partner offices in Senegal, Burkina Faso, Philippines, Sri Lanka, India, Bangladesh, Cambodia, Ecuador, Zambia, Mexico, and Morocco. Please contact their Brighton, England Headquarters for details and contact information.

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Joint United Nations Programme on HIV/AIDS (UNAIDS)

Cooperating Agency	Joint United Nations Programme on HIV/AIDS (UNAIDS)
Project Number	936-3090.08
Grant Number	AAG-G-00-97-00006-00
Duration	9/97-9/02
Geographic Scope	Worldwide

Purpose: To strengthen the capacities of national governments for an expanded response to HIV/AIDS; to provide technical and policy leadership in the global fight against HIV/AIDS and; to facilitate international donor cooperation.

Description: Since 1986, USAID has been an active partner with the United Nations in the response to the global AIDS pandemic. In January 1996, the joint United Nations Program on HIV/AIDS (UNAIDS) was launched. UNAIDS brings together the efforts and resources of eight UN system organizations to help the world prevent new HIV infections, care for those already infected, and mitigate the impact of the epidemic. UNAIDS is guided by a Programme Coordinating Board with representatives of 22 countries (including the U.S.) from all geographic regions, the eight UNAIDS cosponsors (UNICEF, WHO, UNDP, UNFPA, UNDCP, UNESCO, ILO and the World Bank) and five nongovernmental organizations. USAID provides approximately 20-25% of UNAIDS budget, including funding to individual cosponsors for activities at the country level in the Joint UNAIDS Biennium Workplan.

The UNAIDS Secretariat works in the following major areas:

Facilitation: UNAIDS Secretariat, at a global level, harmonizes the efforts of the eight UN cosponsors and mobilizes new partners. At country level, the UNAIDS country program advisors and the UN Theme Groups coordinate the UN response to the pandemic to assist government and civil society groups in their HIV/AIDS efforts.

Distilling Best Practices: plays a key role in the management and dissemination of knowledge that is fundamental to combating AIDS. It identifies and analyzes sound strategies and approaches, and produces a series of documents targeted at technical experts, program managers and policy makers.

Tracking the epidemic: A key function of the UNAIDS Secretariat is to gather, analyze and disseminate information on the evolving epidemic and on the global response to it.

Advocacy: Both internationally and within countries, UNAIDS advocates for an expanded response to the epidemic. The Secretariat works to build committed and supportive governments, donors and private companies, and to bring on board a wide range of other partners, including religious organizations, NGOs, people living with HIV/AIDS and those whose lives are otherwise affected or threatened by the epidemic.

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The Synergy Project

Cooperating Agency	TvT Associates, Inc.
Project Number	936-3090.04
Contract Number	HRN-C-00-99-00005-00
Duration	4/99-4/04
Geographic Scope	Worldwide

Purpose: This project will provide technical assistance to design and refine HIV/AIDS strategic objectives and results frameworks; monitor the processes, outcomes and impact of HIV/AIDS prevention and/or mitigation activities; and collect and disseminate research, implementation and evaluation findings.

Description: Synergy will provide the following services:

Design: informed technical assistance to the field (Missions and Regional Bureaus) for the design of national HIV/AIDS prevention and mitigation strategies, and Strategic Results Frameworks. The focus of the design activities will be at the SO, IR and sub-IR levels, including development of indicators, targets and gross budgets.

Monitoring: technical assistance to the field to design M&E systems, as well as developing a programmatic and financial database to include Mission, Regional Bureau and Global Bureau HIV/AIDS programs.

Evaluation: technical assistance to the field to conduct project evaluations of programs as requested.

Lessons Learned: the identification of lessons learned from information across the G/PHN portfolio and from Mission bilateral projects, in order to inform future design and monitoring efforts.

Dissemination: the gathering and dissemination of information, as well as summarization of specific information for targeted audiences and thematic focus.

In addition, Synergy will serve as the major support mechanism for other key G/PHN/HN/HIV-AIDS Division activities, such as serving as the Secretariat for the Implementation Working Group (IWG), the resource for the primary HIV/AIDS project database, the source of ongoing technical updates to the field, the source of the HIV/AIDS consultant database and the main HIV/AIDS reference library.

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U.S. Bureau of the Census

Cooperating Agency	U.S. Bureau of the Census (BUCEN)
Project Number	936-3090.05
Agreement Number	HRN-P-00-98-00002-00
Duration	1/98-12/02
Geographic Scope	Worldwide

Purpose: To maintain the HIV/AIDS Surveillance Data Base; provide demographic and economic models of the impact of the HIV and AIDS in urban and rural areas of the developing world and; disseminate information through a variety of publications and presentations throughout the world.

Description: In FY 98, G/PHN entered into an agreement with the U.S. Bureau of Census (BUCEN) for HIV/AIDS data information transfer, demographic modeling and human resources which were - and continue to be - integral to USAID's work in HIV/AIDS. BUCEN contributed to the USAID program with support to monitor the spread of HIV and to understand the potential effect the AIDS pandemic will have on development. The technical assistance from BUCEN for this work has required experience in epidemiological data base projections and population projection modeling. With its worldwide reputation for excellence, the International Programs Center (IPC) represents the preeminent U.S. source for technical expertise in this area.

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U.S. Peace Corps

Cooperating Agency	U.S. Peace Corps
Project Number	936-3090.06
Agreement Number	AAG-P-00-97-00008-00
Duration	9/97-9/02
Geographic Scope	Worldwide

Purpose: Under this agreement, the Peace Corps will continue to promote and expand its community based efforts in HIV/AIDS prevention and care.

Description: There are currently 7,000 Peace Corps Volunteers working in over 90 countries around the world. The Interagency Agreement funds will assist with NGO and CBO development; integrated community health approaches to HIV/AIDS prevention and care; programs for women and girls; and programs for youth, both in and out of school. The funds from the agreement will provide technical assistance to Peace Corps Volunteers, field staff, host country officials and counterparts, NGOs and PVOs through training, project design and evaluation assistance, materials development, and dissemination of results.

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Food and Nutrition Technical Assistance (FANta)

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-3094.01
Agreement Number	HRN-A-00-98-00046-00
Duration	8/98-9/03
Geographic Scope	Worldwide

Purpose: The Food and Nutrition Technical Assistance (FANta) project is designed to leverage maximum nutritional impact of nutrition and food security-related programs implemented by USAID and its partners in developing countries.

Description: FANta will provide technical assistance in nutrition and food security-related program design, implementation, monitoring, and evaluation as well as nutrition and food security policy and strategy development. This program has an unprecedented opportunity to influence the nutritional and health impact of food security and Title II food aid programming, both through its role in providing direct assistance to Private Voluntary Organizations (PVOs) and Cooperates, Missions, host governments, the USAID Bureau for Humanitarian Response (BHR), and through its role in facilitating technical exchange and cooperation with other ongoing G/PHN Center activities.

FANta's Strategic Objective is "improved food/nutrition policy, strategy and program development" with three Intermediate Results (IRs):

- IR1: USAID's and PVOs' nutrition and food security-related program development, analysis, monitoring and evaluation improved;
- IR2: USAID, host country governments and PVOs establish improved, integrated nutrition and food security-related strategies and policies; and
- IR3: Best practices, and "acceptable standards" in nutrition and food security-related policy and programming adopted by USAID, PVOs and other key stakeholders.

Partners: Cornell University; Tufts University; and Food Aid Management (FAM).

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LINKAGES: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-3082.01
Agreement Number	HRN-A-00-97-00007-00
Duration	11/96-10/06
Geographic Scope	Worldwide

Purpose: LINKAGES is the principal USAID initiative for improving breastfeeding (BF), Lactational Amenorrhea Method (LAM), and related maternal and child dietary practices. The focus of the program is on mainstreaming BF, LAM, and related complementary feeding and maternal dietary practices into ongoing Child Survival (CS), Maternal and Child Health (MCH), Family Planning (FP) and Emergency Relief Programs. The program also addresses Mother-to-Child Transmission (MTCT) issues in countries with high HIV prevalence, by providing accurate technical information and counseling, to enable women to make informed decisions about infant feeding.

Description: Principal activities include: 1) technical support to help CAs, PVOs, public sector programs, and other donors improve their BF, LAM, and related infant feeding and maternal nutrition activities; and focusing on mainstreaming these activities at all levels of service delivery, IEC, curricula, and monitoring and evaluation tools in MCH and FP programming; 2) development and testing of community-based strategies, peer counseling and other models, while linking to ongoing efforts in Baby-Friendly Hospital Initiatives (BFHI) and Integrated Management of Childhood Illness (IMCI); 3) interventions in cooperation with large PVO networks and scaling up proven strategies and technologies; 4) program-driven research such as operations research, cost-effectiveness, and country program assessments, with in-depth cross-site analysis and smaller focused studies of intervention components.

Partners/Collaborators: La Leche League International; Cooperative for Assistance and Relief Everywhere (CARE); Catholic Relief Services (CRS); and World Vision International (WVI).

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Maternal and Neonatal Health Program (MNH)

Cooperating Agency	JHPIEGO Corporation
Project Number	936-3092.01
Agreement Number	HRN-A-00-98-00043-00
Duration	10/98-9/03
Geographic Scope	Worldwide

Purpose: The Maternal and Neonatal Health Program (MNH) is the principal USAID initiative for applying, testing and implementing new approaches and technologies to reduce maternal and newborn deaths in developing countries.

Description: The Maternal and Neonatal Health Program directly supports the Agency's goal of reducing deaths, nutrition insecurity and adverse health outcomes to women as a result of pregnancy and childbirth, and has significant impact on infant and child survival. The program provides short- and long-term technical assistance to countries to increase the use of appropriate maternal and neonatal health and nutrition practices and services. A systems approach is used in the following focus areas: 1) integration of appropriate maternal nutrition interventions into programs; 2) improved birth preparedness, including awareness, access, community planning and appropriate antenatal care; 3) improved management of complications, including obstructed labor, hemorrhage, sepsis, eclampsia, and the sequela of incomplete or unsafe abortion; and 4) improved safe delivery, postpartum and newborn care, including quality care and early recognition of complications in the postpartum and newborn period.

The program is intended to increase the demand for and supply of maternal health services through community, family, and women's participation, and to create enabling health systems through policy development and advocacy, research, human resources and management interventions, and strengthened service delivery and quality assurance practices.

Partners: The Centre for Development and Population Activities (CEDPA); Johns Hopkins University Center for Communication Programs (JHU/CCP); and Program for Appropriate Technology in Health (PATH).

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UNFPA - Reproductive Health

Cooperating Agency	United Nations Population Fund (UNFPA)
Project Number	936-3092.03
Agreement Number	AAG-G-00-01-00003-00
Duration	9/01-9/03
Geographic Scope	Worldwide

Purpose: This grant is designed to promote worldwide improvement of reproductive health.

Description: This grant supports a USAID/PHN partnership with the United Nations Population Fund (UNFPA) to improve the reproductive health status of women by strengthening support for Post-Abortion Care (PAC). Activities will include a field inquiry of current PAC activity in UNFPA country programs, support of selected country PAC programs, and development of guidance to the field for scale-up based upon evaluation

Special Restrictions: This activity does not accept Field Support funds.

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Unicef Maternal Newborn Health

Cooperating Agency	UNICEF
Project Number	936-3080
Agreement Number	936-3080-G-00-6-575 AAG-G-00-97-00021
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: This portion of the grant is designed to promote the world wide improvement of maternal and neonatal health.

Description: This grant supports a USAID/PHN partnership with the United Nations Children's Fund (UNICEF). This grant will strengthen UNICEF expertise and provide support so that high level expert(s) can effectively promote maternal and neonatal nutrition, health and survival in UNICEF-assisted countries where maternal and neonatal mortality rates are high. Emphasis will be placed on transfer of knowledge + expertise to UNICEF field programs, with particular emphasis on evidence-based interventions in maternal nutrition, antenatal care, skilled attendance at birth, treatment of obstetric complications, postpartum and newborn care.

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WHO Maternal and Newborn Health

Cooperating Agency	World Health Organization (WHO)
Project Number	936-3100
Grant Number	AAG-G-00-99-00005
Duration	9/00-9/04
Geographic Scope	Worldwide

Purpose: This portion of the grant is designed to promote worldwide improvement of maternal and neonatal health.

Description: This grant supports a USAID/PHN partnership with the World Health Organization to support maternal and newborn health activities including development and promotion of the Integrated Management of Pregnancy and Childbirth (IMPAC) package; global monitoring of maternal and newborn health; estimates and analysis of direct and indirect causes of maternal death; development of standards and norms for newborn health; and support for UN Interagency activity to support maternal and newborn health.

Special Restrictions: This activity does not accept Field Support funds.

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Health and Child Survival Fellows (HCSF) Program

Cooperating Agency	Johns Hopkins University (JHU)
Project Number	936-3098.03
Agreement Number	HRM-A-00-01-0001-00
Duration	01/01 - 01/06
Geographic Scope	Worldwide

Purpose: Identification, placement, and supervision of Health and Child Survival Fellows and University Affiliates in field assignments and USAID/Washington.

Description: This program identifies, places, and supervises junior and mid-level experts in field and USAID/W assignments that contribute to the career development and commitment to international health of the experts themselves, as well as to the Agency's health and child survival programs.

The program includes:

- A national secretariat at the Johns Hopkins University Institute for International Programs (JHU/IIP), responsible for management and administration of the program, ensuring the full and effective participation of a broad range of institutions and the selection of the most qualified and committed candidates as Fellows.
- A collaborating network of Schools of Public Health and Historically Black Schools of Medicine (HBCUs), which provides a roster of applications and advisors as a basis for recruitment of Fellows.

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Technical Advisors in AIDS and Child Survival (TAACS)

Cooperating Agency	See Subprojects
Project Number	936-5970
Contract Number	See Subprojects
Duration	See Subprojects
Geographic Scope	Worldwide

Purpose: Under this activity, CEDPA and the Department of Health and Human Services, Office of International and Refugee Health and subagreement with the Centers for Disease Control and Prevention administer the placement of approximately 80 technical advisors in USAID Missions and USAID Washington to support activities in child survival, family planning and population, HIV/AIDS control and prevention, infectious disease control and prevention, and basic education.

Description: Both DHHS, through OIRH/CDC, and CEDPA will continue to backstop TAACS employed under this activity. Approximately 85 TAACS have been placed since the beginning of the activity in 1987 under a continuing provision in USAID's appropriations legislation. In fiscal year 1998, the legislation broadened the TAACS authority to include basic education, and authority was expanded again in fiscal year 1999 to include other infectious diseases.

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Office of International and Refugee Health/ Centers for Disease Control and Prevention (OIRH/CDC)

Cooperating Agency	OIRH/CDC
Subproject Number	936-5970.02
Agreement Number	HRN-P-00-98-00015-00
Duration	5/03
Geographic Scope	Worldwide

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The Centre for Development and Population Activities (CEDPA)

Cooperating Agency	CEDPA
Subproject Number	936-5970.03, 936-5970.04
Contract Number	HRN-C-00-98-00006-00
Duration	8/03
Geographic Scope	Worldwide

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Part IV

Office of Field and Program Support

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Kristen Frank

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Program Activities Support (PAS) Support Services Contract

Cooperating Agency	PaL-Tech, Inc.
Project Number	936-3070
Contract Number	HRN-C-00-98-00008-00
Duration	7/98-7/03
Geographic Scope	USAID/Washington

Purpose: To provide administrative, programmatic and logistic support services to the Center for Population, Health and Nutrition, Global Bureau (G/PHN).

Description: PaL-Tech, Inc. provides administrative and project support services to the Center for Population Health and Nutrition in the Global Bureau (G/PHN), thus, contributing to the achievement of PHN and Agency goals and objectives. The three offices within the PHN Center have complementary objectives and activities: the Office of Population (G/PHN/POP), the Office of Health and Nutrition (G/PHN/HN) and the Office of Field and Program Support (G/PHN/OFPS). This contract requires the contractor to provide administrative program and logistics support to PHNC staff. Support needs are driven by quantitative and qualitative performance measures, goals and objectives of PHNC, activities carried out in support of the Agency's PHN programs, and routine assessments of support operations.

Special Restrictions: This project cannot take Field Support Funds.

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Office of Field and Program Support (OFPS)

Roles and Responsibilities

OFPS strengthens USAID's efforts to achieve global impact in protecting health and reducing fertility by mobilizing and coordinating available population, health and nutrition resources in support of field programs. Major objectives and functions of the office are as follows:

To Coordinate Strategic Planning for the PHN Center

- Coordinates the preparation of the Center's Strategic Plan and Results Review & Resource Request (R4), with technical input from PHN/POP and PHN/HN.
- Coordinates regular reviews of Center activities and approaches to ensure consistency with the strategic plan and feasibility within existing financial and human resources.
- Coordinates PHN Center technical input to Agency Strategic Plan, Annual Performance Plan, and Annual Performance Report.
- Organizes periodic country and regional reviews for senior management to identify issues and determine progress toward meeting Agency strategic objectives.
- Organizes and serves as Secretariat for the PHN Sector Council.

To Assist Strategic Planning for the Field

- Assists missions in the development of country strategies and programs, through the framework of the Joint Programming/Planning Country (JPPC) Teams.
- Elicits ideas from the field for developing and testing more effective, cost-efficient, and results-oriented initiatives and results packages in the PHN Center portfolio.
- Promotes country-level coordination in the PHN sector within the Agency and among other donors.
- Represents the field perspective in Agency PHN technical fora, including the PHN Sector Council, other Agency meetings, and external meetings with donors, NGOs, and other institutions.

To Provide Field Support and Coordination

- Coordinates and provides program, technical, and logistical support to the JPPC Teams. Participates as a full member of the joint programming teams, within the JPPC team



framework.

- Coordinates the G/PHN technical review of missions' and regional bureaus' R4s, and ensures that appropriate technical staff from the PHN Center participate.
- Provides or arranges technical assistance to the field for the development, implementation, and evaluation of PHN country programs.
- Provides support to JPPC team coordinators in planning visits from field staff to USAID/W, and provides logistical support, (e.g., messages, scheduling, office support) to visiting field staff.
- Works with JPPC teams to review mission program documentation and serves as a repository for essential field documents.
- Coordinates the dissemination of policy, professional, and legislative updates and technical materials to field offices. Promotes intra-agency exchange of information, e.g., participate as a member of Agency working groups, and ensures that relevant information is transmitted to the field.
- Elicits and coordinates the preparation of selected country-specific information to senior management, including success stories, lessons learned, and technological breakthroughs.

To Provide Program Support and Coordination

- Serves as the focal point in the PHN Center for guidance on all programming actions.
- Coordinates and prepares the PHN Center's portion of the Bureau Program and Budget Submissions (BPBS), Congressional Presentations (CPs), Operating Year Budget (OYB), Congressional Notifications (CN's), and rescissions.
- Serves as the PHN Center's point for recording and tracking all Field Support funding levels, based on communications with the missions and regional bureaus.
- Serves as PHN Center review and/or approval point for funding actions and implementation documents. Ensures that program design and approval documents (i.e., results packages, authorizations, etc.) developed by the PHN Center Offices are in compliance with Bureau and Agency directives.
- Acts as the PHN Center's training entity for staff training on Field Support funding policies, procedures, and systems.
- Coordinates training and operation of the Agency's funding systems (e.g., New Management Systems (NMS) computerized funding management system) for the PHN Center.
- Provides senior management of Global Bureau and the Agency with information, briefing papers, talking points, and/or memoranda on PHN programmatic and technical issues.



To Provide Coordination for Regional Bureaus and Field Missions

- Serves as liaison between technical offices, missions, and regional bureaus in the development and negotiation of field support requirements.
- Serves as PHN Center's liaison with the Office of Planning and Budget and the Office of Procurement. Maintains responsibility for the overall Center compliance with Agency procurement and budget policy.
- Facilitates AID/W review processes for Mission PHN program and project documents.

To Coordinate Overall Sector and Center Performance Monitoring

- Coordinates the standardization of global PHN performance indicators and assists the Center and the field in using these indicators to track and measure results.
- Develops and updates the Center's Performance Monitoring Plan.
- Coordinates PHN sector analyses to identify trends, determine obstacles, and propose programmatic solutions at Global, Regional and Mission levels.
- Stays abreast of Regional Bureau strategies and program trends in the various PHN subsectors.
- Identifies programming or technical issues and ensures appropriate actions are taken to address them.

To Provide Personnel, Career Development, Communication, and Management Support

- Identifies and tracks professional and staff requirements for the PHN Center, Bureaus, and the field. Coordinates recruitment of technically-qualified professionals to fill all vacant positions.
- Plans and implements in-service training and professional development strategy and individual development plans (IDPs).
- Manages the PHN Center's Incentive Awards Program.
- Manages available space, equipment, furniture, and supplies for the PHN Center.
- Provides technical support for the PHN Center's computer and telecommunications systems, including the Internet and the USAID intranet.



Part V

Project Directory

Regional Bureaus & the Bureau for Humanitarian Response

Africa

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Asia & the Near East

Doug Heisler

Europe & Eurasia

Mary Ann Micka

Latin America & Caribbean

Carol Dabbs

Humanitarian Response

Sheila Lutjens

Support for Analysis and Research in Africa II (SARA II)

Cooperating Agency	Academy for Educational Development (AED)
Contract Number	AOT-C-00-99-00237-00
Duration	2000-2005
Geographic Scope	Sub-Saharan Africa region

Purpose: To provide strategic expertise, services and support to Africa Bureau, Office of Sustainable Development (AFR/SD) to develop and promote adoption of policies and strategies for health and human resources development.

Description: The project supports AFR/SD in identifying social sector issues, developing analytical agenda and providing management assistance for analysis, dissemination and advocacy, promoting African partnerships, strengthening African capacity, and monitoring and evaluation.

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ANE Regional HIV/AIDS Program

Cooperating Agency	The ANE program operates
Project Number	through a variety of
Contract Number	Global Bureau Projects
Duration	Varied
Geographic Scope	Asia/Near East region

Purpose: To support the implementation of HIV/AIDS prevention activities from a regional perspective. The program also supports innovative pilot projects that may be replicated throughout the region and cross-border activities.

Description: ANE Regional funds are programmed through a variety of G/PHN projects, mostly in the G/PHN/HN/HIV-AIDS Division. Regional funds support the implementation of HIV/AIDS prevention activities at cross border sites in South and Southeast Asia to address an epidemic that is transboundary in nature. Regional HIV/AIDS funds support activities in both presence and non-presence countries and expand the capacity of centrally funded and mission bilateral prevention projects and programs in the ANE region. The Bureau's HIV/AIDS strategy has five primary objectives:

- Increase the number of cross-border HIV/AIDS prevention and sexually transmitted infection (STI) treatment programs to limit cross border HIV/AIDS infections;
- Increase the capacity of local governments or non-governmental organizations (NGOs) to undertake behavioral and epidemiological surveillance and to use that information in policy and program development;
- Increase in the number of ANE assisted implementing agencies adopting best practices or new HIV/AIDS services;
- Strengthen the capacity of communities and NGOs to provide HIV/AIDS prevention and care and support services;
- Support regional training and research efforts.

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Health Partnerships Program

Cooperating Agency	American International Health Alliance (AIHA)
Project Number	180-0037
Grant Number	Multiple
Duration	1998-2003
Geographic Scope	Newly Independent States and Central and Eastern Europe

Purpose: To establish and promote sustainable partnerships that foster more effective and efficient delivery of health services in the NIS and CEE.

Description: Operating under a series of cooperative agreements with USAID since 1992, the American International Health Alliance (AIHA) has created a highly successful partnership model to address local, national, and regional health care issues in the New Independent States (NIS) of the former Soviet Union and the countries of Central and Eastern Europe (CEE).

AIHA's network of partnerships promote sustainable change in health care systems throughout the CEE and NIS, while enhancing the medical skills of thousands of health care practitioners and improving the quality of care for patients in newly emerging democracies. The program also focuses on training policy makers and administrators at all levels of government to improve health care organizations and introduce market-oriented solutions.

Historically, partnerships have generally addressed six key, interrelated elements of health care reform: a reorientation toward primary care; a closer alignment of personal health and public health efforts; the development of care management, the development of resource management; an increase in the quality and availability of information; and the promotion of democratic values.

Since 1992, AIHA has supported 93 partnerships involving health care providers and educators in 23 nations of the CEE and NIS

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Hurricane Reconstruction Centers for Disease Control and Prevention

Cooperating Agency	United States Department of Health and Human Services Centers for Disease Control and Prevention 598-0864
Inter-Agency Agreement (IAA) Number	LAC-P-00-99-000019-00
Grant Number	5/99-5/02
Duration	Costa Rica, Dominican Republic, El Salvador, Guatemala, Haiti, Honduras, Nicaragua
Geographic Scope	

Purpose: The purpose of the IAA is to “re-establish and sustain the capacity for assessment of health status and the early detection and effective response to outbreaks and changes in disease patterns” in countries damaged by hurricanes Mitch and Georges.

Description: The IAA contributes to the Strategic Objective. “Hurricane Reconstruction Services in the LAC Region provided.” This IAA has four Intermediate Results: (IR1) disease surveillance rehabilitated and information used for public health decisions; (IR2) increased availability of trained epidemiologists in the region and the training of other levels of health workers by these epidemiologists; (IR3) Infectious diseases and environmental health laboratory capacity rehabilitated; and (IR4) Capacity of the Ministries of Health to design and implement disease prevention and control programs institutionalized.

CDC’s technical assistance is designed to ensure that practical sustainable results are achieved in the seven target countries. To achieve this longer-term objective, the project is focussed on developing the national capacity for health trend analysis, early detection of change in disease patterns and effective response to outbreaks.

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LAC Regional Health Priorities Strategic Objective

Cooperating Agency	Pan American Health Organization (PAHO)
Project Number	598-003
Grant Number	<i>See Grants on next page</i>
Duration	1996-2004
Geographic Scope	LAC region

Purpose: The purpose of this eight-year strategic objective is more effective delivery of selected health services and policy interventions..

Description: This project builds on successful efforts of prior projects with PAHO, supporting regional vaccination activities (598-0643 and 598-0786) as well as the LAC Regional Health and Nutrition Technical Services Support Project (598-0687). It provides assistance to LAC country programs to strengthen quality and availability of selected health services: 1) vaccinations; 2) emergency obstetrical care; 3) integrated management of childhood illness; 4) interventions for the control and prevention of antimicrobial resistance; 5) HIV/AIDS, 6) family planning, 7) malaria control in the Amazon basin and, 8) health sector reforms to increase equity of access to basic health care. Strategic approaches include: 1) improving service delivery; 2) improving surveillance systems; 3) increasing the sustainability of health programs; and 4) health management and financial reforms. Target countries are specific to each initiative; e.g., for vaccinations and integrated management of childhood illness, the eight LAC child survival emphasis countries receive more intense attention.

Implementation uses PAHO's recognized regional leadership and influence on policy and national programs and the cutting edge technical leadership of USAID's worldwide partners in these health technologies. USAID missions may supplement the grants to PAHO under this project to implement their programs. Field Support funds are transferred to the following organizations: Center for Human Services, The Partnership for Child Health, TVT Associates, Abt Associates, Inc., and Management Sciences for Health (MSH), the Population Council, Family Health International, the Centers for Disease Control, National Academy for Sciences, the TB Coalition for Technical Assistance, Johns Hopkins University, the Centre for Development and Population Activities, and the Public Health Institute..

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Vaccination

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Duration 1996-2002
Geographic Scope LAC Regional
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Integrated Management of Childhood Illness

Grant Number LAC-G-00-98-00012-00
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Geographic Scope LAC Regional
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Also implemented by field support to the Partnership for Child Health

Maternal Mortality

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Geographic Scope LAC Regional
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Also implemented by field support to the Center for Human Services

Health Sector Reform

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Duration 1997-2002
Geographic Scope LAC Regional
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Also implemented by field support to Management Sciences for Health, and Abt Associates

Infectious Disease

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Also implemented by field support to CDC, NAS, and Management Sciences for Health

Family Planning

Grant Number N/A
Duration 2001-2002
Geographic Scope LAC Regional
CTO: Marguerite Farrell (202) 712-0458

Implemented with field support by Family Health International, Population Council, and the Center for Human Services

HIV/AIDS

Grant Number N/A
Duration 2001-2002
Geographic Scope LAC Regional
Technical Advisor: Marguerite Farrell (202) 712-0458

Implemented with field support by: TvT, Inc.

PVO Child Survival Grants Program (CSGP)

Cooperating Agency	See Subgrants *
Project Number	938-0500
Grant Number	See Subgrants *
Duration	See Subgrants *
Geographic Scope	Worldwide

Purpose: The PVO Child Survival Grant Program (CSGP) is a partnership supporting effective community oriented child survival programs that measurably improve infant and child health and nutrition and contribute to the reduction of infant and child mortality.

Description: The objective of the CSGP is to improve the capacity of U.S.-based PVOs and their local partners to carry out effective child survival programs that measurably improve infant and child health and nutrition, and contribute to the reduction of infant and child mortality.

The PVO CSGP aims for a) increased success of the programs in the CSGP in meeting their objectives and measurably improving the health of children and mothers; b) PVOs and USAID operating units jointly programming for community health activities; c) PVOs' increased resource mobilization for CS activities; d) PVOs' increased technical and operational support to local partners/NGOs for the design and implementation of child survival programs; and e) U.S. public awareness of the success of the PVO child survival program.

DCHA/PVC invests USAID resources in well-designed, technically sound, cost-effective programs that focus on activities and strategies which are expected to have the greatest and most sustainable reductions in mortality of children under five.

* A PDF File containing all PVO Child Survival Subgrants may be downloaded from http://www.usaid.gov/pop_health/resource/phnug.htm

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Part VI

PHN Information Directories

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USAID Mission PHN Contacts

PHN Cooperating Agencies, Contractors and Grantees

PHN Cooperating Agency, Contractor and Grantee Field Offices

PHN Center Activity Reference Matrix

USAID Phone and Email Directories Online

The USAID Phone list is an excellent source of contact information. In order to provide you with the most up to date information the contact list has been made available as a separate document, which may be downloaded from:

http://www.usaid.gov/pop_health/resource/phnug.htm

Another excellent source of contact information is the USAID online directory, which allows you to search our phone book, email addresses and fax numbers. You may access the online directory by navigating to

<http://www.usaid.gov/>

and selecting the “directory” option from the main menu.

JPPCT List Online

The JPPCT List is a comprehensive overview of USAID mission related contacts. The list displays Technical Representatives, Regional Coordinator, HIV/AIDS Advisors, Senior Advisors, Desk Officers and PHN Officers for over 70 missions. The online JPPCT List is updated every two weeks and may be downloaded from:

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USAID Contraceptive Suppliers

Oral Contraceptives:

Wyeth-Ayerst International
1667 K Street
Suite 127
Washington DC, 20036

Contact Person: Jeremiah L. Chambers
Telephone: 202-496-2438
Fax: 202-659-2676
Email: chambej@md.ahp.com

Injectables:

Pharmacia & Upjohn Worldwide
(Depo-Provera) 100 Route 206 North
Peapack, NJ 07977

Contact Person: Gerald L. Stoneburner
Telephone: 908-901-8684
Fax: 908-901-1878
Direct Fax: 908-901-1887
Email: gerald.l.stoneburner@am.pnu.com

Female Condoms:

The Female Health Company
875 North Michigan Avenue
Suite 3660
Chicago, IL 60611

Contact Person: Claudia Ruiz
Telephone: 1-800-884-1601

Condoms:

Alatech Healthcare Products
595 East Lawrence Harris Highway
Slocumb, AL 36375

Contact Person: Linda Williams
Telephone: 334-886-9377
Fax: 334-886-9338
Email: LindaAHCP@aol.com

IUDs:

FEI Products, Inc.
825 Wurlitzer Drive
North Tonawanda NY, 14120

Contact Person: Lance Bronnenkant

Implants:

Leiras OY
(Norplant)
Pansiontie 9
PO Box 325
00101
Helsinki, Finland

Contact Person: Marja-Lisa Makinen
Telephone: 358-21-6332362
Email: Marja-Lisa.Makinen@leiras.fi

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Hampden Square
4800 Montgomery Lane, Suite 600
Bethesda, MD 20814-5341
Telephone: (301) 913-0500
Fax: (301) 652-3618
<http://www.phrproject.com>

Academy for Educational Development (AED)

1825 Connecticut Avenue, NW
Washington, DC 20009-5721
Telephone: (202) 884-8000
Fax: (202) 884-8400
<http://www.aed.org>
<http://www.fanta.org>
<http://www.linkagesproject.org>

Adventist Development and Relief Agency

12501 Old Columbia Pike
Silver Spring, MD 20904-6600
Telephone: (301) 680-6380
Fax: (301) 680-6370
<http://www.adra.org>

Africare

440 R Street, NW
Washington, DC 20001
Telephone: (202) 462-3614
Fax: (202) 387-1034
<http://www.africare.org>

Aga Khan Foundation

1901 L Street, NW, Suite 700
Washington, DC 20036
Telephone: (202) 293-2537

**American International Health Alliance
(AIHA)**

1212 New York Ave., NW
Washington, DC 20005
Telephone: (202) 789-1136
Fax: (202) 789-1277
<http://www.aiha.com>

Andean Rural Health Care

P.O. Box 216 (299 Lakeshore Drive)
Lake Junaluska, NC 28745-0216
Telephone: (828) 452-3544
Fax: (828) 452-7790

Ani & Narod Memorial Fund

300 Park Avenue, 17th Floor
New York, NY 10022
Telephone: (212) 935-5242
Fax: (212) 202-6350
<http://www.ani.org>

AVSC International

440 Ninth Avenue
New York, NY 10001
Telephone: (212) 561-8000
Fax: (212) 779-9489
<http://www.avsc.org>

**Boston University School of Public Health,
Center for International Health**

715 Albany St.
Boston, MA 02118
Telephone: (617) 414-1260

<http://www.international-health.org>

POPTECH

Basic Health Management, International
1111 N. 19th Street, Suite 505
Arlington, VA 22209
Telephone: (703) 522-5540
Fax: (703) 522-5674
<http://www.poptechproject.com>

**Camp Dresser & McKee International
Inc.**

EHP Operations Center
1611 North Kent Street, Suite 300
Arlington, VA 22209
Telephone: (703) 247-8730
Fax: (703) 243-9004
<http://www.ehproject.org>

Catholic Relief Services (CRS)

209 W. Fayette Street
Baltimore, MD 21201-3443
Telephone: (410) 625-2220
Fax: (410) 234-3178

Center for Human Services

7200 Wisconsin Avenue, Suite 500
Bethesda, MD 20814-4204
Telephone: (301) 654-8338
Fax: (301) 941-8427
<http://www.urc-chs.com>

**Centers for Disease Control
& Prevention (CDC) (*CDC/InfoTech*)**

1600 Clifton Road, NE, MS C-08
Atlanta, GA 30333
Telephone: (404) 639-2234
Fax: (404) 639-2230
<http://www.cdc.gov>

Office of Global Health
Centers for Disease Control & Prevention (CDC)

4770 Buford Highway, NE
Atlanta, GA 30341
Telephone: (770) 488-5212 (*Environmental Health*)
Telephone: (770) 488-1195 (*TAACS*)
Fax: (770) 488-1004 (*Environmental Health*)
Fax: (770) 488-1318 (*TAACS*)
<http://www.cdc.gov>

Division of Reproductive Health
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4770 Buford Highway, NE, MS K-22
Atlanta, GA 30341
Telephone: (770) 488-6200
Fax: (770) 488-6242
<http://www.cdc.gov>

The Centre for Development
and Population Activities (CEDPA)
1400 16th Street, NW, Suite 200
Washington, DC 20036
Telephone: (202) 667-1142
Fax: (202) 332-4496
<http://www.cedpa.org>

Christrian Children's Fund, Inc. (CCF)

2821 Emerywood Parkway
Richmond, VA 23261-6484
Telephone: (804) 756-2700
Fax: (804) 756-2718
<http://www.christianchildrensfund.org>

Clapp and Mayne, Inc.

8401 Colesville Road, Suite 425
Silver Spring, MD 20910
Telephone: (301) 495-9572
Fax: (301) 495-9577
<http://www.cmusa.com>

Concern Worldwide US, Inc.

104 East 40th Street, Room 903
New York, NY 10016
Telephone: (212) 557-8000
Fax: (212) 557-8004

Cooperative for Assistance and Relief Everywhere (CARE)

151 Ellis Street, NE
Atlanta, GA 30303-2439
Telephone: (404) 681-2552
Fax: (404) 577-1205
<http://www.care.org>

Counterpart International, Inc.

1200 18th Street, NW, Suite 1100
Washington, DC 20008
Telephone/Fax: (202) 296-9676

Deloitte Touche Tohmatsu

1001 G Street, NW
Suite 400 West
Washington, DC 20037
Telephone: (202) 879-4961
Fax: (202) 220-2189
<http://www.deloitte.com>
<http://www.cmsproject.com/>

Office of International and Refugee Health
Department of Health and Human Services (OIRH/DHHS)

Parklawn Building
5600 Fishers Lane, Room 90
Rockville, MD 20857
Telephone: (301) 443-1774
Fax: (301) 443-0742
<http://www.dhhs.gov>

Development Associates, Inc. (DAI)

1730 North Lynn Street
Arlington, VA 22209
Telephone: (703) 276-0677
Fax: (703) 276-0432

CONRAD

Eastern Virginia Medical School (EVMS)

1611 North Kent Street, Suite 806

Arlington, VA 22209

Telephone: (703) 524-4744

Fax: (703) 524-4770

<http://www.conrad.org/>

EngenderHealth

440 Ninth Avenue

New York, NY 10001

Telephone: (212) 561-8000

Fax: (212) 779-9489

www.avsc.org

Esperanca, Inc.

1911 West Earl Drive

Phoenix, AZ 85015

Telephone: (602) 252-7772

Fax: (602) 340-9197

Family Health International (FHI)

(Contraceptive Technology)

P.O. Box 13950

Research Triangle Park, NC 27709

Telephone: (919) 544-7040

Fax: (919) 544-7261

<http://www.fhi.org/>

Family Health International (FHI)

(Impact, YouthNet)

2101 Wilson Boulevard, Suite 700

Arlington, VA 22201

Telephone: (703) 516-9779

Fax: (703) 516-9781

<http://www.fhi.org>

Foundation of Compassionate American Samaritans

P.O. Box 428760

Cincinnati, OH 45242-8760

Telephone: (513) 621-5300

Fax: (513) 621-5307

The Futures Group International

1050 17th Street, NW, Suite 1000

Washington, DC 20036

Telephone: (202) 775-9680

Fax: (202) 775-9694

<http://www.tfgi.com/>

Institute for Reproductive Health

Georgetown University Medical Center

Room 3004, PHC Building

3800 Reservoir Road, NW

Washington, DC 20007

Telephone: (202) 687-1392

Fax: (202) 687-6846

<http://www.georgetown.edu>

Global Health Council (GHC)

1701 K Street, NW, Suite 600

Washington, DC 20006

Telephone: (202) 833-5900

Fax: (202) 833-0075

<http://www.globalhealthcouncil.org/>

Harvard Institute for International Development (HIID)

Harvard University (CHR: ARCH)

Health Office

14 Story Street

Cambridge, MA 02138

Telephone: (617) 495-9791

Fax: (617) 495-9706

<http://www.hiid.harvard.edu>

<http://ih.jhsph.edu/chr/chr.htm>

Harvard School of Public Health

Harvard University (Data for Decision Making)

665 Huntington Avenue

Boston, MA 02115

Telephone: (617) 432-4620

Fax: (617) 432-2181

[http://www.hsph.harvard.edu/](http://www.hsph.harvard.edu/organizations/ddm/homepage.html)

[organizations/ddm/homepage.html](http://www.hsph.harvard.edu/organizations/ddm/homepage.html)

Health Alliances International

1107 NE 45th Street, Suite 410
Seattle, WA 98105
Telephone: (206) 543-8382
Fax: (206) 685-4184

Helen Keller International (HKI)

90 Washington Street, 15th Floor
New York, NY 10006-2214
Telephone: (212) 943-0890
Fax: (212) 943-1220
<http://www.hki.org>

**International Centre for Diarrhoeal
Disease Research, Bangladesh
(ICDDR,B)**

Center for Health and Population Research
Mohakhali, Dhaka 1000
Telephone: 880-2-882-3031
Fax: 880-2-882-3116
<http://www.icddr.org>
<http://www.childhealthresearch.org>

**International Clinical Epidemiology
Network (INCLIN)**

3600 Market Street
Philadelphia, PA 19104-2644
Telephone: (215) 222-7700
Fax: (215) 222-7741
<http://www.inclin.org>
<http://www.childhealthresearch.org>

International Eye Foundation

7801 Norfolk Avenue
Bethesda, MD 20814
Telephone: (301) 986-1830
Fax: (301) 896-1875

International HIV/AIDS Alliance

Queensbury House
104-109 Queens Rd.
Brighton BN1 3XF, UK
Telephone: 44-12-7371-8900
Fax: 44-12-7371-8901

Human Nutrition Institute**International Life Sciences Institute (ILSI)**

1126 16th Street, NW
Washington, DC 20036
Telephone: (202) 659-0524
Fax: (202) 659-3617
<http://www.ilsa.org>

**International Planned Parenthood
Federation (IPPF)**

Regent's College, Inner Circle
Regent's Park
London, NW1 4NS, UK
Telephone: 44-171-487-7900
Fax: 44-171-487-7864
<http://www.ippf.org/>

**International Planned Parenthood
Federation/Western Hemisphere Region
(IPPF/WHR)**

120 Wall Street, 9th Floor
New York, NY 10005-3902
Telephone: (212) 214-0246
<http://www.ippfwhr.org>

International Rescue Committee
122 East 42nd Street, 12th Floor
New York, NY 10168-1289
Telephone: (212) 551-3000
Fax: (212) 551-3186

**International Science and Technology
Institute (ISTI)**

1820 North Fort Myer Drive, Suite 600
Arlington, VA 22209
Telephone: (703) 807-0236
Fax: (703) 807-0278
<http://www.mostproject.org>

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Brown's Wharf
1615 Thames Street, Suite 200
Baltimore, MD 21231-3492
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Telephone: (410) 955-8558 (*Training in Reproductive Health*)
Fax: (410) 614-6643 (*Maternal & Neonatal Health*)
Fax: (410) 614-3458 (*Training in Reproductive Health*)
<http://www.mnh.jhpiego.org> (*Maternal & Neonatal Health*)
<http://www.jhpiego.jhu.edu/> (*Training in Reproductive Health*)

John Snow, Inc. (JSI)

1616 North Fort Myer Drive, 11th Floor
Arlington, VA 22209
Telephone: (703) 528-7474
Fax: (703) 528-7480
<http://www.jsi.com/>
<http://www.mothercare.jsi.com/>

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615 North Wolfe Street
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Telephone: (410) 955-3934 (*CHR: FHACS*)
Telephone: (410) 955-2061 (*Micronutrients for Health*)
Fax: (410) 955-7159 (*CHR: FHACS*)
Fax: 410-955-0196 (*Micronutrients for Health*)
<http://ih.jhsph.edu/chr/fhacs/fhacs.htm>
(*CHR: FHACS*)
<http://www.childhealthresearch.org>
(*CHR: FHACS*)
<http://www.jhu.edu/www/research/>
(*Micronutrients for Health*)

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111 Market Place, Suite 310
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<http://www.jhuccp.org>

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103 East Mount Royal Avenue, Suite 2B
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Telephone: (410) 659-4108
Fax: (410) 659-4118
<http://ih.jhsph.edu/hcsfp>

Joint United Nations Programme on HIV/AIDS (UNAIDS)

World Health Organization
1211 Geneva 27, Switzerland
Telephone: 41-22-791-4510
Fax: 41-22-791-4179
<http://www.us.unaids.org/>

Jorge Scientific Corporation

600 13th Street N.W., Suite 700
Washington, DC 20005
Telephone: (202) 393-9001
Fax: (202) 939-9018
<http://www.phnip.com>

LTG Associates, Inc.

1101 Vermont Avenue, NW
Suite 900
Washington, DC 20005
Telephone: (202) 898-9040
Fax: (202) 898-9057

Lutheran World Relief, Inc. (LWF)

390 Park Avenue South
New York, NY 10016-8803
Telephone: (212) 532-6350
Fax: (212) 213-6081

Macro International, Inc. (ORC Macro)

11785 Beltsville Drive, Suite 300
Calverton, MD 20705-3119
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Fax: (301) 572-0999
<http://www.macrint.com/>

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1515 Wilson Blvd., Suite 710
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Fax: (703) 524-7898
<http://www.msh.org>

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MSH Headquarters
891 Centre Street
Boston, MA 02130
Telephone: (617) 524-7766
Fax: (617) 524-1363
<http://www.msh.org>

Map International

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Brunswick, GA 31525-5000
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Fax: (912) 265-6170

Massachusetts Public Health Biologic Laboratories (MPHBL)

305 South Street
Jamaica Plain, MA 02130
Telephone: (617) 983-6400
Fax: (617) 983-9081

Medical Care Development International (MCDI)

1742 R Street, NW
Washington, DC 20009
Telephone: (202) 462-1920
Fax: (202) 265-4978

Mercy Corps International

3030 SW First Avenue
Portland, OR 97201-4796
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<http://www.mercy corps.org>

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National Cooperative Business Association (NCBA)

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<http://www.cooperative.org>

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<http://www.nih.gov>

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The People-to-People Health Foundation

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Population Reference Bureau (PRB)

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<http://www.prb.org>
<http://www.measurecommunication.org/>

Population Services International (PSI)

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<http://www.census.gov>

U.S. Peace Corps (*HIV/AIDS*)
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<http://www.peacecorps.gov>

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<http://www.who.ch>

<http://www.worldrelief.org>

World Relief Corporation

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PHN Center Activity Reference Matrix

The PHN Center Activity Reference Matrix is an overview of all Users' Guide projects displayed in spreadsheet format. You may download the Activity Reference Matrix from the Users' Guide website:

http://www.usaid.gov/pop_health/resource/phnug.htm

Index

Symbols

698-0485.01 84, 85
936-3024 47
936-3038.01 16, 38
936-3052 21
936-3052.02 18
936-3057 14
936-3068 30
936-3069.01 23
936-3070 22, 116
936-3073 34
936-3078.02 43
936-3078.03 35
936-3079 45
936-3080 110
936-3080.01 69
936-3080.02 70
936-3080.03 71
936-3080.04 72
936-3081 74
936-3082.01 29, 107
936-3083.01 41
936-3083.02 42
936-3083.03 40
936-3083.04 36
936-3084 25
936-3084.02 31
936-3084.03 32, 33
936-3085 26
936-3086 49
936-3088 46
936-3089.01 15
936-3090.01 99
936-3090.02 100
936-3090.03 96
936-3090.04 103
936-3090.05 104
936-3090.06 105
936-3090.07 101
936-3090.08 102
936-3092.01 108
936-3092.03 109
936-3093.01 17
936-3093.02 20
936-3094.01 106
936-3094.02 67
936-3095 44
936-3096.01 53
936-3096.02 65
936-3096.03 91
936-3096.04 54
936-3096.07 61
936-3096.10 63
936-3097 48
936-3098.01 88
936-3098.02 98, 87
936-3098.03 112
936-3099 19
936-3100 90, 111
936-3100.01 79
936-3100.02 81
936-3100.03 80
936-3101.01 24
936-3101.02 27
936-3104.01 89
936-3104.02 93
936-3104.03 94
936-3104.05 92
936-5122.04 62
936-5122.05 68
936-5970 113
936-5970.03 114
936-5986.05 57
936-5986.06 56
936-5986.08 59
936-5986.09 55
936-5986.12 58
936-5991.02 90
936-5992.02 86
936-5994.07 95
936-5994.09 83
936-5994.10 75
936-6000.01 60
936-6000.04 52
936-6000.05 64
936-6001 82
936-6004.01 77
936-6004.43 87
936-6004.50 76
936-6004.55 78
963-3096.08 73

A

AAG-G-00-01-00003-00 109
AAG-G-00-97-00006-00 102
AAG-G-00-97-00019-00 71
AAG-G-00-97-00020-00 70
AAG-G-00-97-00021-00 69
AAG-G-00-97-00024 59
AAG-G-00-97-00025-00 84
AAG-G-00-98-00008 95
AAG-G-00-99-00005 111
AAG-G-00-99-00005-00 81
AAG-P-00-01-00001 63
AAG-P-00-97-00008-00 105
AAG-P-00-99-00004-00 80
AAG-P-00-99-00006 90

AAG-P-00-99-00006-00 79
 Abt Associates, Inc. 17, 26, 89
 Academy for Educational Development (AED)
 18, 54, 67, 83, 24, 29, 93, 106, 107, 40
 ACNM. *See* American College of Nurse-Midwives
 acute flaccid paralysis (AFP) 70, 71, 72
 Acute Respiratory Infection (ARI) 52
 Acute Respiratory Infections Vaccine Project (ARIV 52
 Adetunji, Jacob 41
 ADVANCE Africa 24
 Adventist Development and Relief Agency (ADRA) 33
 AED 83. *See* Academy for Educational Development
 (AED)
 AFP. *See* acute flaccid paralysis (AFP)
 Africa 9
 Africa Integrated Malaria Initiative (AIMI) 74
 AIDS Social Marketing (AIDSMARK) 96
 AIDSLINK 98
 AIDSMARK. *See* AIDS Social Marketing (AIDSMARK)
 AIM 43. *See* AIDS Impact Model (AIM)
 AIMI. *See* Africa Integrated Malaria Initiative (AIMI)
 Alan Guttmacher Institute 21
 Alatech Healthcare Products 14
 Alliance for the Prudent Use of Antibiotics (APUA) 93
 Alrut, Neen 103
 Ambrosino, Donna 64
 American College of Nurse-Midwives 17
 AMP. *See* Association Pour l'Aide à la Médecine Préven-
 tive ()
 AMREF. *See* African Medical and Relief Foundation
 (AMREF)
 Anderson, Sigrid 13
 ANE Regional Coordinator Carina Stover 115
 anemia 74
 Ani & Narod Memorial Fund 73
 Applied Research in Child Health (ARCH) 55
 Applied Research in Child Survival Services:Qualit 86
 ARCH. *See* Applied Research in Child Health (ARCH)
 ARD 75
 Ardhaljian, Raffi P. 73
 ARI. *See* Acute Respiratory Infections (ARI)
 ARIVAC. *See* Acute Respiratory Infections Vaccine Project
 Asia & Near East 9
 Associates in Rural Development (ARD) 75
 Association Pour l'Aide à la Médecine Préventive () 52
 Austin, John H. 75
 Avni, Michal 40
 AVSC. *See* EngenderHealth
 AVSC International 17, 30
 AWARENESS Project. *See* Natural Family Planning &
 Reproductive Health Awar
 Aylward, Bruce 71

B

Baby-Friendly Hospital Initiatives (BFHI) 29, 107
 Bakamjian, Lynn 30

Baker, Jean 29, 107
 Bangladesh 101
 Bangladesh NGO Home Gardening and Nutrition Educat
 62
 Bartlett, Alfred 53
 Basic Support for Institutionalizing Child Survival 53
 BASICS II. *See* Basic Support for Institutionalizing Child
 Surviva
 Benin 74
 Benton, Bruce 84
 Bergevin, Yves 110
 BHR 106
 Black, Robert 57
 Blount, Stephen 79
 Blum, Nancy L. 94
 Blumberg, Naomi 16, 38, 39
 Boerma, Ties 42
 Bongaarts, John 48
 Boni, Anthony 93, 94
 Borrazzo, John 75
 Boston University 93
 Boston University School of Public Health 55
 Bowes, Cathy 115
 breastfeeding 29, 107
 Bridbord, Kenneth 80
 Brown, Betsy 51, 7
 BUCEN 104. *See* U.S. Bureau of the Census (BUCEN)
 Buono, Nicole 49
 Bureau for Africa (AFR) 9
 Bureau for Asia & Near East (ANE) 9
 Bureau for Europe and New Independent States 9
 Bureau for Humanitarian Response (BHR) 9, 106
 Bureau for Latin America/Caribbean (LAC) 9
 Burkholder, Brent 71
 Burkina Faso 101
 Bush, Robert D. 36, 37
 Bushman, Gabrielle 98
 Busquets, Maria 18, 21, 13

C

Callier, Sandy 91
 Cambodia 101
 Camp Dresser & McKee International Inc. 75
 CARE. *See* Cooperative for Assistance and Relief
 Everywhere ()
 CARE Endowment 25
 CARE MoRR 31
 Carolina Population Center, University of North Ca 42
 Carr, Celeste 87, 88, 90
 Carroll, Dennis 74, 81, 83, 84, 95
 Catalyst Consortium 27
 Cates, Ward 45
 Catholic Relief Services (CRS) 29, 107
 Cavanaugh, Karen 89
 CCP. *See* Center for Communication Programs
 CCP-A-00-95-00022-00 45

CCP-A-00-96-90001-00 18
 CDC. *See* Centers for Disease Control and Prevention (CDC)
 CDC/Infotech 90
 CEDPA. *See* Centre for Development and Population Activities; Centre for Development and Population Activities,
 Center for Communication Programs 18, 21
 Center for Human Services 86
 Center for International Health Information (CIHI) 88
 Centers for Disease Control and Prevention (CDC) 16, 74, 79, 82, 90, 38, 39
 Centers for Disease Control and Prevention IAA 79
 Central Contraceptive Procurement 15
 Central Contraceptive Procurement 14
 Centre for African Family Studies (CAFS) 24
 Centre for Development and Population Activities, 18, 32, 114, 108, 43
 cGMP 64
 CHANGE. *See* The CHANGE Project: Behavior Change Innovation/Sta
 CHANGE Project: Behavior Change Innovation/Sta 54
 Child Health Research 55, 56, 57, 58, 59
 Child Health Research:World Health Organization/Ch 59
 Child Survival Division (CS) 12
 Childreach/Plan International 33
 Children's Vaccine Initiative (CVI) 60
 Children's Vaccine Program (CVP) 52, 60
 Children's Vaccine Training Program 64
 Childs, Lisa 25, 31, 32
 chlamydia 61
 Chung, Eunyoung 106
 CID. *See* Consortium for International Development (CID)
 CIHI. *See* Center for International Health Information (CIHI)
 Clapp and Mayne, Inc. 65
 Claypool, Lee 48
 CLM. *See* Contraceptives and Logistics Management Division (
 CMT. *See* Communication, Management, and Training Division (
 Cogill, Bruce 106
 Cohen, Barney 35
 Cole, James 105
 Coleman, Elizabeth 114
 Commercial Market Strategies (CMS) 26
 Commission of European Communities 82
 Communication, Management, and Training Division (11
 Community REACH 97
 Conly, Shanti 34
 CONRAD III. *See* Contraceptive Research and Development (CONRAD III
 Consortium for International Development (CID) 65
 Contraceptive Research and Development (CONRAD III 44
 Contraceptive Technology Research (CTR) 45
 Contraceptive Technology Research Project 14

Contraceptives and Logistics Management Division (11
 Cooperative for Assistance and Relief Everywhere (67, 25, 29, 31, 33, 107
 Copeland, Ruth 48
 copper IUDs 14, 45
 CORE Group 72
 Cornell University 106
 Cortez, Clif 101
 Costales, Maria Otelia D. 69
 Cravero, Kathleen 102
 Crawford, Kate 100
 Cross, Harry 43
 CRS. *See* Catholic Relief Services (CRS)
 CS. *See* Child Survival Division (CS)
 CTR. *See* Contraceptive Technology Research (CTR)
 current Good Manufacturing Practices (cGMP) 64
 CVI. *See* Children's Vaccine Initiative (CVI)
 CVP. *See* Children's Vaccine Program (CVP)

D

DAI 65
 Dalmiya, Nita 69
 Darnton-Hill, Ian 62
 Data for Decision Making II 87, 88
 Davidson, Frances R. 62, 66, 67, 68
 Day, Laurence 65
 De Lay, Paul 98
 De Lay, Paul 101, 105
 de Silva, Shyami 26, 28
 de Wolfe, Bob 65
 DELIVER 15
 Deloitte Touche Tohmatsu 26
 Deloitte Touche Tohmatsu (DTT) 24
 Demographic and Health Surveys 88
 dengue 81
 Department of Defense 82
 Department of Health and Human Services (DHHS) 77, 114
 Depo-Provera 14
 Development Associate, Inc. (DAI) 65
 Development Associates (DA) 89
 DHHS. *See* Department of Health and Human Services (DHHS)
 DHS. *See* Demographic and Health Surveys (DHS)
 Diggs, Carter 82
 Diphtheria, Tetanus and Pertussis (DTP) 64
 Displaced Children and Orphans Fund (DCOF) 76
 DMELLD. *See* Design/Monitoring & Evaluation/Lessons Learned/Dis
 Donnay, France 109
 DPE-5991-X-HC-1038-00 90
 DPE-A-00-91-00010-00 98, 87
 DS. *See* Development Associates

E

East West Center, The 41

Eastern Virginia Medical School (EVMS) 44
 ECSP. *See* Environmental Change and Security Project (ECSP)
 Ecuador 101
 EDC 65
 Education Development Center, Inc (EDC) 65
 Egypt 61
 EH. *See* Environmental Health Division (EH)
 EHP II. *See* Environmental Health Project (EHP II)
 Ellen, Mary Stanton 111
 Ellen Stanton, Mary 109
 Ellis, Victoria 45, 47
 Emory University Rollins School of Public Health 89
 Emrey, Bob 51, 113, 91, 95
 ENABLE 32
 Endowment Fund for Sustainability (EFS) 28
 Engel, Nancy 30
 EngenderHealth 30
 Enhanced Vitamin A Effort 67
 Environmental Change and Security Project (ECSP) 20
 Environmental Health 74
 Environmental Health Project (EHP II) 75
 EPI. *See* Expanded Programs for Immunization (EPI)
 epidemiology 39
 Europe & Eurasia 9
 EVMS. *See* Eastern Virginia Medical School (EVMS)
 EWCPOP. *See* The East-West Center Program on Population (EWCPOP)
 Expanded Programs for Immunization (EPI) 52, 60, 72
 Expert Studies of Population Issues 35

F

Family Health and Child Survival (FHACS) 57
 Family Health International 34
 Family Health International (FHI) 100, 24, 45
 Family Planning Logistics Management (FPLM) 16
 Family Planning Services Division (FPSD) 11
 Family Planning/Reproductive Health Services 27
 FamPlan 43
 FANta 106. *See* Food and Nutrition Technical Assistance (FANta)
 FDA. *See* U.S. Food and Drug Administration
 FEI Products, Inc. 14
 Feinberg, Lloyd 76, 77, 78
 female condoms 14
 Female Health Company 14
 FGC. *See* Female Genital Cutting
 FHACS. *See* Family Health and Child Survival (FHACS)
 FHI. *See* Family Health International
 FIC. *See* Fogarty International Center (FIC)
 Fisher, Andrew 99
 Fogarty International Center (FIC) 80
 Food Aid Management (FAM) 106
 Food and Nutrition Technical Assistance (FANta) 106
 Forum for African Women Educationalists (FAWE) 24
 Fox, Elizabeth 54, 63

FPSD. *See* Family Planning Services Division (FPSD)
 Frank, Kristen 115
 Free, Michael 61
 Frischer, Ruth 55, 56, 57, 58, 59
 FRONTIERS. *See* Reproductive Health Operations Research (FRONTIERS)
 Futures Group International, The 88, 43

G

Gabelnick, Henry 44
 Gay, Terry 77, 114
 Georgetown University/Institute for Reproductive H 46
 Gibb, Dale Claire 112, 113
 Gibson, Mike 2
 Gillespie, Duff 7
 Global Bureau 9
 Global Health Council 98, 87
 Global Health Council/NCIH 98, 87
 gonorrhea 61
 Good Manufacturing Practices (cGMP) 64
 Goodridge, Gail 100
 GPH-A-00-01-00005 61
 GPH-A-00-01-00013-00 34
 GPH-A-00-01-00018-00 73
 Greene, Richard 51, 7
 Griffin, Jim 17, 23
 GU/IRH. *See* Georgetown University/Institute for Reproductive H

H

Haemophilus Influenzae type b (Hib) 52
 Halperin, Daniel 96
 Harbison, Sarah 49
 Harris, Suzanne S. 66
 Harvard University 93
 Hawkins, Carl 14
 Hawkins, Steve 15
 HBCUs. *See* Historically Black Schools of Medicine (HBCUs)
 HCSF. *See* Health and Child Survival Fellows (HCSF) Program
 Health and Child Survival Fellows (HCSF) Program 112
 Health and Development Service (HANDS) 93
 Health Policy and Sector Reform Division (HPSR) 12
 Health Resources Support II 77
 Health, World Organization (WHO) 59
 HealthTech III 61
 Heiby, James 86, 92
 Helen Keller International (HKI) 62, 67
 Helfenbein, Saul 24
 Herr, Rachel 29, 107
 Hib. *See* Haemophilus Influenzae type b (Hib)
 HIID. *See* Harvard Institute for International Development (H
 Historically Black Schools of Medicine (HBCUs) 112
 HIV Dipstick 61

HIV Operations Research (HORIZONS) 99
 HIV/AIDS 98, 79, 81, 93
 HIV/AIDS Division (HIV-AIDS) 12
 HKI. *See* Helen Keller International (HKI)
 Hoekstra, Ed 70
 Holfeld, Joyce 7
 Hollis, Lavern 115
 Home Gardening and Nutrition Education Program 62
 HORIZONS. *See* HIV Operations Research (HORIZONS)
 Horn, Marjorie 47, 49
 HPSR. *See* Health Policy and Sector Reform Division (HPSR)
 HPSS. *See* Health Policy and Systems Strengthening Project
 HRM-A-00-01-0001-00 112
 HRN-A-00-00-00001-00 20
 HRN-A-00-00-00004-00 24
 HRN-A-00-00-00012-00 35
 HRN-A-00-00-00016-00 93
 HRN-A-00-00-00017-00 94
 HRN-A-00-93-00046-00 66
 HRN-A-00-95-00023-00 64
 HRN-A-00-95-00025-00 52
 HRN-A-00-96-90005 56
 HRN-A-00-96-90010 55
 HRN-A-00-96-9006 57
 HRN-A-00-97-00007-00 29, 107
 HRN-A-00-97-00009-00 21
 HRN-A-00-97-00011-00 46
 HRN-A-00-97-00012-00 99
 HRN-A-00-97-00015-00 68
 HRN-A-00-97-00017-00 100
 HRN-A-00-97-00018-00 42
 HRN-A-00-97-00021-00 96
 HRN-A-00-98-00001-00 40
 HRN-A-00-98-00009-00 32, 33
 HRN-A-00-98-00012-00 49
 HRN-A-00-98-00013-00 62
 HRN-A-00-98-00020-00 44
 HRN-A-00-98-00023-00 31
 HRN-A-00-98-00041-00 23
 HRN-A-00-98-00042-00 30
 HRN-A-00-98-00043-00 108
 HRN-A-00-98-00044-00 54
 HRN-A-00-98-00046-00 106
 HRN-A-00-98-00047-00 67
 HRN-A-00-98-00053-00 72
 HRN-A-00-99-00009-00 25
 HRN-A-00-99-00010-00 48
 HRN-A-00-99-00012-00 22
 HRN-A-00-99-00016-00 83
 HRN-A-00-99-00018-00 98, 87
 HRN-A-00-99-00022-00 17
 HRN-C-00-00-00006-00 43
 HRN-C-00-00-00007-00 47
 HRN-C-00-00019-00 89
 HRN-C-00-93-00036-00 75

HRN-C-00-96-90013-00 86
 HRN-C-00-97-00019-00 41
 HRN-C-00-98-00006-00 114
 HRN-C-00-98-00008-00 116
 HRN-C-00-98-00039-00 26
 HRN-C-00-99-00005-00 103
 HRN-C-00-99-00007-00 53
 HRN-G-00-92-00011-00 60
 HRN-G-00-98-00010-00 101
 HRN-G-00-99-00003 58
 HRN-I-00-98-00028-00 65
 HRN-I-00-98-00029-00 65
 HRN-I-00-98-00030-00 65
 HRN-I-00-98-00031-00 65
 HRN-I-00-98-00032-00 65
 HRN-I-00-98-00033-00 65
 HRN-I-00-98-00034-00 65
 HRN-I-00-98-00035-00 65
 HRN-I-00-99-00002-00 91
 HRN-I-00-99-00011-00 75
 HRN-P-00-97-00014-00 16, 38
 HRN-P-00-97-00016-00 36
 HRN-P-00-98-00002-00 104
 HRN-P-00-98-00015-00 114
 HRN-P-HI-92-00057-00 77
 HRP. *See* WHO Special Program of Research, Development and R

I

ICDDR,B: Centre for Health and Population Research 56
 ICRW. *See* International Center for Research on Women (ICRW)
 IEC. *See* Information, Education and Communication
 IESC. *See* International Executive Service Corps
 ILO 102
 ILSI. *See* International Life Sciences Institute (ILSI)
 IMCI. *See* Integrated Management of Childhood Illness (IMCI)
 IMPACT. *See* Implementing AIDS Prevention and Control Activities
 Implementing AIDS Prevention and Control Activities 100
 Improving the Performance of Primary Providers in R 17
 INACG. *See* International Nutritional Anemia Consultative Group
 INCLEN. *See* International Clinical Epidemiology Network
 Indefinite Quantity Contract (IQC) 65, 91
 India 101, 61
 Indonesia 52, 61, 62
 Infectious Diseases 93
 Infectious Diseases Results Package 79, 80, 81, 90
 Information, Education, and Communication Support 18
 Institute of Tropical Medicine (ITM) 100
 Integrated Management of Childhood Illness (IMCI) 29, 107
 Integrated Management of Pregnancy and Childbirth 111
 International Broadcasting Bureau 63

International Center for Research on Women (ICRW) 99
 International Clinical Epidemiology Network (INCLE) 58
 International Executive Service Corps (IESC) 67
 International Family Planning Perspectives 21
 International Food Policy Research Institute 67
 International HIV/AIDS Alliance 99, 101
 International Life Sciences Institute 66
 International Nutritional Anemia Consultative Group 66
 International Planned Parenthood Federation (IPPF) 28
 International Projects Assistance Services 17
 International Science and Technology Institute (IS) 67, 75
 International Vitamin A Consultative Group (IVACG) 66
 INTRAH 17
 IPAS. *See* International Projects Assistance Services
 IPPF Endowments 28
 IPPF/WHO 28
 IPPF/WHO Endowment 28
 IQC. *See* Indefinite Quantity Contract (IQC)
 Israel, Ronald 65
 ISTI. *See* International Science and Technology Institute (IS)
 ITM. *See* Institute of Tropical Medicine (ITM)
 IUDs 45
 IVACG. *See* International Vitamin A Consultative Group (IVACG)

J

Jafari, Hamid 71
 Jansen, William 17
 Jeffers, Joanne 36, 37
 Jennings, Victoria 46
 JHPIEGO Corporation 23, 86, 108, 110
 JHU. *See* Johns Hopkins University (JHU)
 JHU/CCP 86, 108
 Johansson, Elof D.B. 48
 John Snow, Inc. (JSI) 16, 65, 75, 88
 John Snow Research and Training Institute 42
 Johns Hopkins Center for Communication Programs 18, 21, 86
 Johns Hopkins School of Public Health 18, 21, 57, 68
 Johns Hopkins University (JHU) 18, 21, 57, 67, 68, 112
 Johns Hopkins University Center for Communication 108
 Johns Hopkins University School of Public Health 86
 Johnson, Tim 16, 38, 39, 40
 Johnson, William H. 47
 Joint Commission International 86
 Joint Programming and Planning Countries (JPPC) 9, 117, 118
 Joint United Nations Programme on HIV/AIDS (UNAIDS) 102
 Jorge Scientific Corporation 88
 JPPC. *See* Joint Programming and Planning Countries (JPPC)
 JSI. *See* John Snow, Inc. (JSI)

K

Karra, Mihira 29, 107, 45, 46
 Kawabata, Kei 95
 Kearns, Jean 65
 Kenya 74
 Kern, Ann 81
 Koek, Irene 51, 82
 Koniz-Booher, Peggy 65
 Kreis, Katharine 24, 26
 Krista Stewart 36, 37, 40, 41, 42

L

La Leche League International 29, 107
 Lactational Amenorrhea Method (LAM) 29, 107
 Lamprey, Peter 100
 Landry, Steve 52, 64
 Lans, Deborah 61, 80
 Lansang, Mary Ann 58
 Latin America & Caribbean 9
 Lavezolli, Susan 22
 Lee, Bessie 97
 Leiras Oy 14
 Lewing, Tara 88
 LINKAGES: Breastfeeding and LAM, and Related Mater 29, 107
 Lionetti, Denise 103
 Lowry, Patrick 65
 LTG Associates, Inc. 91, 47
 Lynch, Matthew 75

M

M&L 19
 Macro International, Inc. 42
 Magarick, Ron 23
 malaria 57, 79, 81, 82
 Malaria Vaccine Development Program (MVDP) 82
 Malawi 74
 Management and Leadership Development (MLD) 19
 Management Sciences for Health (MSH) 100, 19, 65, 24, 93
 Manning, Judy 44
 Manoff Group, The 54, 75
 MAQ. *See* Maximizing Access and Quality (MAQ) Initiative
 Massachusetts Public Health Biologic Laboratories 64
 Masse, Susan 114
 Massee, O. Bateman 75
 Maternal and Child Health Technical Assistance and 65
 Maternal and Neonatal Health Program (MNH) 108
 Maynard, James 52
 MBL. *See* Massachusetts Biologic Laboratories (MBL)
 McGuire, David 83
 McHugh, Laura 112, 113
 measles 70, 71, 72
 MEASURE 16, 36, 37, 38, 40, 41, 42

MEASURE CDC 38, 39
 MEASURE Communication 40
 MEASURE DHS+ 41
 MEASURE Evaluation 42
 MEASURE: BUCEN Survey and Census Information, Leade
 36, 37
 Media/Materials Clearinghouse 21
 MEDS 91. *See also* Monitoring, Evaluation, and Design/
 Assessment Supp
 meningitis 70, 71, 72
 Meridian Development Foundation 26
 Mexico 101
 Michigan Fellows 20
 Micronutrient Global Leadership 66
 Micronutrient Operational Strategies and Technolog 67
 Micronutrients for Health 68
 Miller, Roy 67
 MLD. *See* Management and Leadership Development
 (MLD)
 MNH. *See* Maternal and Neonatal Health Program (MNH)
 Moloney-Kitts, Michele 28, 30, 34
 Monitoring, Evaluation, and Design/Assessment Supp 91
 Morocco 101
 MOST. *See* Micronutrient Operational Strategies and
 Technolog
 Mother-to-Child Transmission 29, 107
 Mott, Polly 97
 MSH. *See* Management Sciences for Health (MSH)
 MTCT 43
 MVDP. *See* Malaria Vaccine Development Program
 (MVDP)

N

NAS. *See* The National Academy of Sciences (NAS)
 National Academy of Sciences (NAS) 35
 National Council for International Health. *See* Global
 Health Council
 National Immunization Days (NIDs) 70, 71, 72
 National Institutes of Health 82
 National Institutes of Health (NIH) 80
 national regulatory authorities (NRAs) 64
 Natural Family Planning & Reproductive Health Awar 46
 NCBA. *See* National Cooperative Business Association
 (NCBA)
 NCIH. *See* Global Health Council/NCIH
 neonatal tetanus 70, 71, 72
 Nepal 62
 NeTMark 83
 Neuse, Margaret 7, 13
 New Management Systems (NMS) 118
 Newberry, David 72
 Newton, Gary 102, 7, 115
 Nicholas, David 86
 NIDs. *See* National Immunization Days
 NIH. *See* National Institutes of Health (NIH)
 NIH - Tuberculosis Research and Training 80

NMH. *See* Nutrition and Maternal/Infant Health Division
 (NMH)
 NMS. *See* New Management Systems (NMS)
 NORPLANT® 14, 45
 Norton, Maureen 27
 Nutrition and Maternal/Infant Health Division (NMH) 12

O

OCP 84
 Office of Field and Program Support (OFPS) 117, 118, 119
 Office of International and Refugee Health (OIRH) 77
 Office of International and Refugee Health/DHHS 77, 114
 OFPS 12
 Ogden, Ellyn 69, 70, 71, 72
 OIRH 77
 O'Malley, Jeffrey 101
 Onchocerciasis Control Program (OCP) 84
 OPV. *See* oral polio vaccine (OPV)
 oral polio vaccine (OPV) 61
 ORC Macro 41
 Orinda, Vincent 69
 Ortho-McNeil Pharmaceutical 14

P

P&E. *See* Policy & Evaluation Division (P&E)
 PAC. *See* Post-Abortion Care
 Pacque-Margolis, Sara 42
 Pact, Inc 97
 PaL-Tech, Inc. 2, 116
 Pan American Health Organization (PAHO) 60
 Panalpina 14
 Partners for Health Reform plus 89
 Partnership for Child Health Care, Inc. 53
 PAS. *See* Program Activities Support (PAS) Support
 Services C
 PATH. *See* Program for Appropriate Technology in Health
 (PATH)
 Pathfinder International 27
 PCS. *See* Population Communication Services
 Pharmacia & Upjohn Worldwide 14
 Philippines 101, 62
 Philoxenia International Travel 89
 PHRplus. *See* Partnerships for Health Reform (PHR)
 Pielemeier, John 114
 Pielemeier, Nancy 89
 Piot, Peter 102
 PIP. *See* Population Information Program (PIP)
 Pirio, Gregory 63
 PLP. *See* Population Leaders Program (PLP)
 Policy & Evaluation Division (P&E) 11
 POLICY II 43
 polio 70, 71, 72
 Polio Eradication and Immunization Support
 69, 70, 71, 72
 Polsky, Judy 60
 POPLINE 21

POPTECH. *See* Population Technical Assistance (POPTECH)

Population Communication Services 18

Population Council 99, 41, 48, 49

Population Fellows Program (Michigan Fellows) 20

Population, Health and Nutrition Information (PHNI) 88

Population Information Program (PIP) 21

Population Leaders Program (PLP) 22

Population Reference Bureau (PRB) 40

Population Reports 21

Population Services International (PSI) 96, 100, 67, 26

Population Technical Assistance (POPTECH) 47

Population-Environment Fellows 20

Post-Abortion Care 109

Powell, Clydette 85

PRB 40

PRGI. *See* Professional Resource Group International, Inc. (P)

Primary Providers' Training and Education in Repro 17

PRIME II. *See* Primary Providers' Training and Education in Repro

PROFAMILIA 28

Professional Resource Group International 76, 78

Program Activities Support (PAS)/Support Services C 116

Program for Appropriate Technology in Health 99, 100, 17, 52, 61, 65, 67, 33, 89, 93, 108

Program for Voluntary Surgical Contraception and R 30

Prospect Associates 18

Prosser, Lizann 26

PSI. *See* Population Services International (PSI)

Public Health Institute (PHI) 22

PVO/NGO Networks 31, 32, 33

PVO/NGO Networks: CARE MoRR 31

PVO/NGO Networks: ENABLE 32, 33

Q

Quain, Estelle 17, 19, 23

Quality Assurance 74

Quality Assurance II 86

Quality Assurance/Human Resources Management 92

R

R., Frances Davidson 62, 66, 67, 68

R4. *See* Results Review & Resource Request (R4)

Radloff, Scott 7, 13

RAPID 43

Rational Pharmaceutical Management Plus (RPM Plus) 93

Ratzan, Scott 18

refugee RH 39

Reproductive Health Awareness 46

Reproductive Health Operations Research (FRONTIERS) 49

Research Division (R) 11

Research Triangle Institute (RTI) 75, 43

Results Review & Resource Request (R4) 117

Re-

RHA. *See* Reproductive Health Awareness

Rilling, Mark 15, 16, 13, 38

Rimon, Jose G. II 18

Rinehart, Ward 21

Robb-McCord, Judith 108

Roberts, Carla 116

Ross, Susan Rae 25, 31

RPM/MSH. *See* Rational Pharmaceutical Management (RPM/MSH)

RPM/USP. *See* Rational Pharmaceutical Management (RPM/USP)

RTI. *See* Research Triangle Institute (RTI)

Rudy, Sharon 22

S

S., Suzanne Harris 66

Sack, David 56

SAG Corporation 89

Sakai, Suomi 60, 69

Save the Children 17, 18, 67

Savelli, Anthony 93

Savino, Catherine 76, 78

SC Johnson 83

Schneider, Antin 54

Schoenecker, Elizabeth 43

Seaton, Paul 112

Sector Council 117

Senegal 101

Senior Technical Advisors in Residence (STARs) 112

SHS. *See* Strengthening of Health Services (SHS) Grant

Simon, Jonathon 55

Singh, Ritu 18

Smithsonian Institution 20

Social Sectors Development Strategies 89

SoloShot 61

Solter, Steve 65

Sommer, Marni 89, 93, 94

Spieler, Jeffrey 13, 44, 45, 46, 50

Sri Lanka 101

SSDS. *See* Social Sectors Development Strategies

Standard Days Method 46

Stanecki, Karen 104

Stanton, David 99, 104

Stanton, Mary Ellen 111

Starbird, Ellen 13, 35

STARs. *See* Senior Technical Advisors in Residence (STARs)

Stephenson, Patricia 108

Stewart, Krista 39

Stout, Isabel 26, 28

Stowe, Andrew 116

Strategic Plan 117

Strengthening of Health Services (SHS) Grant 95

Sumalis, Michelle 87

Sumilas, Michelle 98

survey 39

Sussman, Linda 105, 34
Synergy Project, The 103

T

TAACS. *See* Technical Advisors in AIDS and Child Survival (TAA)
TASC. *See* Maternal and Child Health Technical Assistance and
TB. *See* tuberculosis
TBCTA. *See* Tuberculosis Coalition For Technical Assistance
Technical Advisors in AIDS and Child Survival (TAA 113
Technologies for Child Health 61
Terio, Anne 25, 31, 32, 33
The AWARENESS Project). *See* Natural Family Planning & Reproductive Health Awar
The Centre for Development and Population Activiti 18, 32, 114, 108
The CHANGE ProjectBehavior Change Innovation/State 54
The Office of Field and Program Support (OFPS) 12
The Population Council Program 48
Thompson, Leola 115
Thompson, Rochelle 20, 22
Title II food aid 106
Townsend, John 49
Training in Reproductive Health III 23
Training Resources Group (TRG) 17, 75, 89
TRG. *See* Training Resources Group
TRH. *See* Training in Reproductive Health III
Troedsson, Hans 59
Trostle, Murray 60, 73
tuberculosis 61, 79, 81
Tuberculosis Coalition For Technical Assistance 85
Tufts University 106
Tulane University 99, 42
Tulane University School of Public Health 75
Tulane University School of Public Health and Trop 89
TvT Associates, Inc 47
TvT Associates, Inc. 103, 91
Two Day Method 46

U

U.S. Bureau of the Census (BUCEN) 104, 36, 37
U.S. Food and Drug Administration 48
U.S. Peace Corps 105
U.S. Pharmacopeia Drug Quality and Information (US 94
Ukraine 61
UNAIDS. *See* Joint United Nations Programme on HIV/AIDS (UNAIDS)
UNDCP 102
UNDP 102
UNESCO 102
UNFPA 102
UNFPA - Reproductive Health 109
UNICEF 102, 52, 60, 61, 70, 88

Unicef Maternal Newborn Health 110
UniJect 61
United Nations Population Fund 109
United States Pharmacopeia 94
University of Alabama at Birmingham 99
University of Michigan 20
University of Newcastle 93
University of North Carolina 100, 17, 42
University Research Corporation (URC) 65, 89
URC. *See* University Research Corporation (URC)
USP. *See* U.S. Pharmacopeia Convention, Inc. (USP)
USPDQI. *See* U.S. Pharmacopeia Drug Quality and Information

V

Vaccine Endowment 73
Vaccine Independence Initiative (VII) 60
Vaccine Quality Assurance Training Program 64
Vaccine Vial Monitors 61
Vaessen, Martin 41
Van Look, Paul F.A. 50
Vandenbroucke, Mary 115
VanLook, Paul F. A. 111
VII. *See* Vaccine Independence Initiative (VII)
VITA Global Alliance 66
vitamin A 61, 66, 68, 70, 71, 72
vitamin A deficiency (VAD) 62
VOA. *See* Voice of America (VOA)
Voice of America (VOA) 63
Vulnerable Children and War Victims Results Packag 76

W

Wassilak, Steve 71
Wells, Vicky 32
West, Keith 68
White, Linda 115
Whitlock, Carrie 21
WHO. *See* World Health Organization (WHO)
WHO Maternal and newborn Health 111
WHO Special Program of Research, Development and R 50
WHO Strengthening of Health Services (SHS) Grant 95
WHO/CAH 59
Wilkins, Karen 90
Willa Pressman 115
Williamson, Nancy E. 34
Wilson, Norma 36, 37, 40, 41, 42
Woodrow Wilson Center 20
World Bank 102, 84, 85
World Bank Onchocerciasis Trust Fund 84
World Health Organization (WHO) 59, 61, 71, 81, 82, 88, 95, 111, 50
World Health Organization Special Programme for Re 82
World Health Organization Umbrella Grant 81
World Health Organization/Child and Adolescent Hea 59
World Vision International (WVI) 29, 107
Wyeth-Ayerst International Ltd. 14

Y

YARH. *See* young adult reproductive health (YARH)
yellow fever 70, 71, 72
YouthNet 34

Z

Zambia 101, 74
Zeilinger, Michael 79, 90
Zimicki, Susan 54
Zinn, Frank 20

PVO	Agreement No.	Effective Dates		Country	AID/W	Activity Director
		From	To			
ADRA	HFP-A-00-01-00039-00	09/30/01	09/29/06	Cambodia	Sheila Lutjens (CTO)	Becky de Graff/Jay Edison Adventist Development & Relief Agency 12501 Old Columbia Pike Silver Spring, MD 20904-6600 Telephone: (301) 680-6380 Fax: (301) 680-6370 jayedison@compuserve.com http://www.adra.org
	HFP-A-00-01-00032-00	09/30/01	09/29/06	Nicaragua	Susan Youll (Sr. Project Officer)	
	FAO-A-00-00-00025-00	09/30/00	09/29/04	Guinea		
	FAO-A-00-00-00026-00	09/30/00	09/29/03	Haiti		
	FAO-A-00-99-00036-01	09/30/99	09/29/03	Yemen		
	FAO-A-00-99-00037-00	09/30/99	09/29/03	Zambia		
	FAO-A-00-98-00042-01	09/30/98	09/29/02	Madagascar		
Africare	FAO-A-00-00-00031-01	09/30/00	09/29/04	Ethiopia	Sheila Lutjens (CTO)	Alan Alemian/Malick Diara/Circe Trevant Africare, Inc. 440 R Street, NW Washington, DC 20001 Telephone: (202) 462-3614 Fax: (202) 387-1034 aalemian@africare.org http://www.africare.org
	FAO-A-00-99-00024-01	09/30/99	09/29/03	Malawi	Susan Youll (Sr. Project Officer)	
	FAO-A-00-99-00025-01	09/30/99	09/29/03	Uganda		
AGF	FAO-A-00-00-00033-00	09/30/00	09/29/04	Tajikistan	Sheila Lutjens (CTO)	Terri Lukas Aga Khan Foundation 1825 K Street, NW Suite 901 Washington, DC 20006 Telephone: (202) 293-2537 Fax: (202) 785-1752 tlukas@akfusa.org
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	FAO-A-00-00-00030-00	09/30/00	09/29/04	Peru	Susan Youll (Sr. Project Officer)	
	FAO-A-00-99-00029-01	09/30/99	09/29/03	Kenya		
	FAO-A-00-99-00028-01	09/30/99	09/29/03	Nepal		
	FAO-A-00-98-00075-00	09/30/98	09/29/02	India		
	FAO-A-00-98-00076-01	09/30/98	09/29/02	Nicaragua		
	FAO-A-00-97-00060-02	09/30/97	09/30/02	Bolivia *		
CCF	FAO-A-00-98-00059-01	09/30/98	09/29/02	Angola	Sheila Lutjens (CTO)	Mary Ann Jared Christian Children's Fund, Inc. 2821 Emerywood Parkway Richmond, VA 23261-6484 Telephone: (804) 756-2700 Fax: (804) 756-2718 http://www.ccfusa.org
	FAO-A-00-98-00067-01	09/30/98	09/29/02	Senegal	Nitin Madhav(Technical Advisor)	
CII	FAO-A-00-00-00028-00	09/30/00	09/29/04	India	Sheila Lutjens (CTO)	Darshna Vyas Counterpart International, Inc. 1200 18th Street, NW Suite 1100 Washington, DC 20008 Telephone: (202) 296-9676 dvyas@counterpart.org
	FAO-A-00-00-00027-00	09/30/00	09/29/04	Uzbekistan	Nitin Madhav(Technical Advisor)	
CRS	HFP-A-00-01-00042-00	09/30/01	09/29/06	Cambodia	Sheila Lutjens (CTO)	Alfonso Rosales Catholic Relief Services 209 W. Fayette Street Baltimore, MD 21201-3443 Telephone: (410) 625-2220 Fax: (410) 234-3178 arosales@catholicrelief.org http://www.catholicrelief.org
	FAO-A-00-00-00037-00	09/30/00	09/29/04	Philippines	Nitin Madhav(Technical Advisor)	
	FAO-A-00-99-00012-01	09/30/99	09/29/03	Honduras		
CWI	HFP-A-00-01-00044-00	09/30/01	09/29/05	Rwanda	Sheila Lutjens (CTO)	Rob Williams Concern Worldwide US, Inc. 104 East 40th Street, Room 903 New York, NY 10016 Telephone: (212) 557-8000 Fax: (212) 557-8004 rob.williams@concern-ny.org
	FAO-A-00-00-00039-00	09/30/00	09/29/04	Bangladesh	Nitin Madhav(Technical Advisor)	
FOCAS	FAO-A-00-97-00028-00	09/30/01	09/29/03	Haiti (Ext.)	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	Richard P. Taylor, Amy Metzger Foundation of Compassionate American Samaritans P.O. Box 428760 Cincinnati, OH 45242-8760 Telephone: (513) 621-5300 Fax: (513) 621-5307 focas@aol.com

PVO	Agreement No.	Effective Dates		Country	AID/W	Activity Director
		From	To			
HAI	FAO-A-00-98-00054-00	09/30/98	09/29/02	Mozambique	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	Mary Ann Mercer Health Alliances International 1107 NE 45th Street, Suite 410 Seattle, WA 98105 Telephone: (206) 543-8382 Fax: (206) 685-4184 hai@u.washington.edu
HKI	FAO-A-00-99-00015-00	09/30/99	09/29/03	Mali	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	Ian Danton Hill Helen Keller International 90 Washington Street, 15th Floor New York, NY 10006-2214 Telephone: (212) 943-0890 Fax: (212) 943-1220 ihill@hki.org http://www.hki.org
HOPE	HFP-A-00-01-00031-00	09/30/01	09/29/06	Haiti	Sheila Lutjens (CTO)	The People-to-People Health Foundation (Proj. HOPE) Bettina Schwethelm Health Sciences Education Centre, Carter Hall Millwood, VA 22646 Telephone: (540) 837-2100 Fax: (540) 837-1813 bschweth@projhope.org http://www.projhope.org
	FAO-A-00-00-00029-01	09/30/00	09/29/03	Peru	Nitin Madhav(Technical Advisor)	
	FAO-A-00-99-00026-01	09/30/99	09/29/03	Uzbekistan		
	FAO-A-00-98-00017-01	08/01/98	07/31/02	Malawi		
	FAO-A-00-98-00018-00	08/01/98	07/31/02	Nicaragua		
	FAO-A-00-97-00030-00	09/30/01	09/29/05	Guatemala (Ext)		
IEF	FAO-A-00-99-00039-00	09/30/99	09/29/03	Bolivia	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	John Barrows International Eye Foundation 7801 Norfolk Avenue Bethesda, MD 20814 Telephone: (301) 986-1830 Fax: (301) 986-1875 jbarrows@iefusa.org
IRC	FAO-A-00-99-00011-00	09/30/01	09/29/05	Rwanda	Sheila Lutjens (CTO) Nitin Madhav(Technical Advisor)	Dr. Kamal Raj International Rescue Committee 122 East 42nd Street, 12th Floor New York, NY 10168-1289 Telephone: (212) 551-3000 Fax: (212) 551-3186 Raj@theirirc.org irc@theirirc.org
LWR	FAO-A-00-97-00059-01	09/30/97	3/31/02	India *	Sheila Lutjens (CTO) Nitin Madhav(Technical Advisor)	Kenlynn K. Schroeder Lutheran World Relief, Inc. 390 Park Avenue South New York, NY 10016-8803 Telephone: (212) 532-6350 Fax: (212) 213-6081 lwr@lwr.org http://www.lwr.org
MCDI	FAO-A-00-99-00023-01	09/30/99	09/30/03	Bolivia	Sheila Lutjens (CTO)	Joseph Carter Medical Care Development Inc. 1742 R Street, NW Washington, DC 20009 Telephone: (202) 462-1920 Fax: (202) 265-4078 mcdi@mcd.org http://www.mcd.org
	FAO-A-00-98-00027-00	09/30/98	09/29/02	Madagascar	Nitin Madhav(Technical Advisor)	
	FAO-A-00-97-00025-00	09/30/01	09/29/05	S.Africa (Ext.)		
MCI	HFP-A-00-01-00014-00	09/30/01	09/29/06	Azerbaijan	Sheila Lutjens (CTO)	Karla Percy Mercy Corps International 3030 SW First Avenue Portland, OR 97201-4796 Telephone: (503) 796-6800 Fax: (503) 796-6844 kpercy@mercycorps.org http://www.mercycorps.org
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PCI	HFP-A-00-01-00043-00	09/30/01	09/29/06	Ghana	Sheila Lutjens (CTO) Nitin Madhav(Technical Advisor)	Chris Bessenecker/Paul Thompson 3550 Afton Road San Diego, CA 92123 Telephone: (858) 279-9690 Fax: (858) 694-0294 cbessenecker@projectconcern.org
PFD	FAO-A-00-98-00040-00	09/30/00	03/31/04	Cambodia	Sheila Lutjens (CTO) Nitin Madhav(Technical Advisor)	John Marrkand Partners for Development 1616 N. Fort Myer Drive, 11th Floor Arlington, VA 22209 Telephone: (703) 528-8336 Fax: (703) 528-7480 pfd@jsi.com http://www.interaction.org/mb/pfd2.html

PVO	Agreement No.	Effective Dates		Country	AID/W	Activity Director
		From	To			
PLAN	HFP-A-00-01-00046-00	09/30/01	09/29/06	Mali	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	Jennifer Luna/Joseph Valadez PLAN International USA, Inc. (Childreach) 3260 Wilson Boulevard, Suite 11 Arlington, VA 22201 Telephone: (703) 807-0190 Fax: (703) 807-0627 lunaj@plan.geis.com josephvaladez@compuserve.com
	FAO-A-00-00-00035-00	09/30/00	09/29/04	Cameroon		
	FAO-A-00-99-00059-01	09/30/99	09/29/03	Burkina Faso		
	FAO-A-00-99-00058-01	09/30/99	09/29/03	Kenya		
	FAO-A-00-98-00025-00	09/30/98	09/29/02	Senegal		
	FAO-A-00-98-00042-00	09/30/01	09/29/06	Nepal (Ext.)		
PSBF	FAO-A-00-99-00040-02	09/15/99	09/29/03	Philippines	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	Linda Arbogast Pearl S. Buck Foundation, Inc. Green Hills Farm P.O. Box 181 (620 Dublin Road) Perkasie, PA 18944-0181 Telephone: (215) 249-0100 Fax: (215) 249-9657 psbf@voicenet.com
PSI	FAO-A-00-00-00024-00	09/30/00	09/29/03	Rwanda	Sheila Lutjens (CTO) Nitinandhav(Technical Advisor)	Andrea Fearnheyough Population Services International 1120 19th Street, NW, Suite 600 Washington, DC 20036 Telephone: (202) 785-0072 Fax: (202) 785-0120 http://www.psiwash.org
	FAO-A-00-98-00021-00	09/30/01	09/29/04	Haiti (Ext)		
SC	FAO-A-00-00-00010-00	09/30/00	09/29/04	Bolivia	Sheila Lutjens (CTO) Susan Youll (Sr. Project Officer)	Kim Wylie/David Marsh Save the Children 54 Wilton Road Westport, CT 06880 Telephone: (203) 226-7272 Fax: (203) 221-3799 kwylie@savethechildren.org dmarsh@savethechildren.org
	FAO-A-00-00-00036-00	09/30/00	09/29/03	Mozambique		
	FAO-A-00-99-00050-01	09/30/99	09/29/03	Malawi		
	FAO-A-00-99-00049-02	09/30/99	09/29/03	Nepal		
	FAO-A-00-98-00026-01	09/30/98	09/29/02	Egypt *		
	FAO-A-00-98-00022-00	09/30/98	09/29/02	Tajikistan		
	FAO-A-00-98-00024-01	09/30/98	09/29/02	Guinea		
	FAO-A-00-97-00054-00	09/30/01	09/29/06	Ethiopia (Ext.)		
WRC	HFP-A-00-01-00029-00	09/30/01	09/29/06	Rwanda	Sheila Lutjens (CTO) Nitinandhav(Technical Advisor)	Melanie Morrow World Relief Corporation P.O. Box WRC Wheaton, IL 60189 Telephone: (630) 665-0235 Fax: (630) 665-4473 mmorrow@wrc.org
	FAO-A-00-00-00050-00	09/30/00	09/29/04	Malawi		
	FAO-A-00-99-00042-01	09/29/99	09/29/03	Mozambique		
	FAO-A-00-98-00051-02	09/30/98	09/29/02	Cambodia		
WVI	HFP-A-00-01-00045-00	09/30/01	09/29/06	Kenya	Sheila Lutjens (CTO) Nitinandhav(Technical Advisor)	Anne Henderson, Larry Casazza World Vision Relief and Development, Inc. 220 I Street, NE, Suite 270 Washington, DC 20002 Telephone: (202) 547-3743 Fax: (202) 547-4834 ahenderson@worldvision.org http://www.worldvision.org
	FAO-A-00-00-00038-00	09/30/00	09/29/03	Cambodia		
	FAO-A-00-99-00027-01	09/29/99	09/29/03	Indonesia		
	FAO-A-00-99-00043-02	09/30/99	09/30/03	S. Africa *		
	FAO-A-00-98-00041-01	09/30/98	09/29/02	India		
	FAO-A-00-97-00039-00	09/30/97	03/31/02	Philippines *		

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Ghana	Marge Horn, Carter Diggs	Holly Dempsey, Ishrat Husain	Kristen Frank	Harriett Destler, David Stanton	Buck Buckingham	Joyce Holfeld	Dennis Panther AFR/WA	Laura Slobey , Lawrence Aduonum-Darko, Jane Wickstrom, Peter Wondergem
Kenya	Naomi Blumberg, Linda Sussman	Mary Ettling, Roxanna Rogers	Ellen Lynch	Linda Sussman, Harriett Destler	Ishrat Husain	Scott Radloff	Kim Lucas AFR/AA/GHAI Chad Weinberg AFR/EA	Dana Vogel , Mike Strong, Richard Osmanski, Cheryl Sonnichsen, Victor Masbayi, Esther Ndiangu, Bedan Gichanga, Emma Njuguna, Jerusha Karuthiru
Nigeria	Cathy Bowes/ Sara Pacque- Margolis	Khadijat Mojidi, Holly Dempsey	Kristen Frank	Alan Getson, Kate Crawford	Ishrat Husain, Peter McDermott	Joyce Holfeld	Vic Duarte AFR/WA	Lynn Gorton , Liane Adams, Bunmi Dosumu, Garba Abdu, Temitayo Odusote, Henrietta Oyebola, Shelagh O'Rourke
South Africa	Celeste Carr, Rochelle Thompson	Ron MacInnis, Roxanna Rogers	Cathy Bowes	David Stanton, Kate Crawford	Ron MacInnis, Peter McDermott	Anne Peterson	Dana Ott AFR/SD	John Crowley , Pamela Wyville-Staples, Melinda Wilson, Anita Sampson
Tanzania	TBD, Frances Davidson	Ishrat Husain, Mary Ettling	Ellen Lynch	Linda Sussman, Harriett Destler	Ishrat Husain	Scott Radloff	Emily McPhie Todd Lofgren	Robert Cunnane , Michael Mushi, Amy Cunningham, Janis Timberlake
Uganda	Krista Stewart, Maria Francisco	Holly Dempsey, Roxanna Rogers	Ellen Lynch	Harriett Destler, Linda Sussman, David Stanton	Buck Buckingham	Scott Radloff	Kimberley Lucas AFR/AA/GHAI Chad Weinberg AFR/EA	Angela Lord , Annie Kaboggoza-Musoke, Suzzane McQueen, Nancy Cecatiello, Jessica Kafuko, Elise Ayers

Special Circumstance Countries

DR Congo	Kristen Frank Daniel Halperin	Connie Davis, Mary Harvey	Ellen Lynch	Kate Crawford, Alan Getson	Ron MacInnis	Paul Ehmer/ Betsy Brown	Mikaela Meredith AFR/EA	Reggie Hawkins , Nancy Bolan, Eugene Nzila, Baudouin Kutuka, Imile Bongo, Amina Kanya-Ngambi, Lina Piripiri, Antoinette Kitoto, Tenley Mogk
Rwanda	Kate Crawford	Connie Davis, Mary Harvey	Ellen Lynch	Kate Crawford, Alan Getson	Buck Buckingham	Paul Ehmer/ Betsy Brown	Mikaela Meredith AFR/EA	Beth Drabant , Patricia Mwanuyera, Barbara Sow
Zambia	Patricia Stephenson, Tara Lewing	Roxanna Rogers, Mary Ettling	Cathy Bowes	David Stanton, Harriett Destler	Roxanna Rogers, Peter McDermott	Scott Radloff	Bill Hagelman BHR/FFP	Robert Clay , Barbara Hughes, Steve Hodgins, Karen Shelley, Pamo Kangwa, Edna Mulenga, Perry Mwangala
Zimbabwe	Carl Hawkins	Roxanna Rogers, Ishrat Husain	Cathy Bowes	Alan Getson	Roxanna Rogers	Scott Radloff	Kent Howard AFR/SA	Peter Halpert , Carl Henn, Patrick Osewe, Mercia Davids, Joyce Maziya, Chipo Sisimayi, Victoria James

* Only Country Coordinators and Alternate Coordinators are listed. Please contact Global Country Coordinator/Point Persons for the list of entire team members.

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As of 3/18/02

Country	Global Country Coordinator*	AFR/SD Technical Rep	G. Regional Coordinator	Global HIV/AIDS Advisor	AFR Bureau HIV/AIDS Advisor	Global Senior Advisor	AFR Bureau Desk Officer	Mission Contacts
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Planning Countries

Angola	Cathy Bowes, Ellyn Ogden	Subhi Mehdi, Mary Harvey	Cathy Bowes	Kate Crawford	Peter McDermott	--	Sheldon Schwartz AFR/SA	Jeff Ashley, Heather Evans, Josefa Gomes, Alexandre Saul, Carla Queiroz
Benin	John Borrazzo TBD	Mary Harvey, Connie Davis	Kristen Frank	Alan Getson, Kate Crawford	Ron MacInnis, Peter McDermott	--	Rebecca Niec AFR/WA	Alicia Dinerstein, Laura Hoemeke, Charles Ogouchi
Eritrea	Matt Lynch, Tim Quick	Buck Buckingham, Holly Dempsey	Ellen Lynch	Harriett Destler	Buck Buckingham	--	Lily Beshawred COMP/YOC/COOP Todd Lofgren AFR/EA	Linda Lou Kelley, Semere Gebregiorgis, David Sintasath
Guinea	Sandra Jordan, Kristen Frank	Khadijat Mojidi, Mary Harvey	Kristen Frank	David Stanton	Ron MacInnis	--	Bernard Lane AFR/WA	Neil Woodruff, Mariama Bah, Kathy Jacquart Aminata Camara
Madagascar	Steve Hawkins, Eunyong Chung	Mary Harvey, Holly Dempsey	Ellen Lynch	Harriett Destler, Beth St. Clair	Ishrat Husain	--	Emily McPhie AFR/EA Todd Lofgren AFR/EA	Susan Anthony, Wendy Benazerga Benjamin Andriamitantoa, Corine Rakotomanga
Malawi	Wyman Stone, David Stanton	Mary Ettling, Ishrat Husain	Cathy Bowes	David Stanton	Buck Buckingham	--	Sean McClure AFR/SA	Mexon Nyirongo, Elise Jensen, Linda Andrews
Mali	Ellen Lynch, Nomi Fuchs	Connie Davis, Holly Dempsey	Kristen Frank	Alan Getson	Ron MacInnis	--	Doral Watts AFR/WA	Ursula Nadolny, Bamoussa Coulibaly, Madiou Yattara, Aida Lo, Salif Coulibaly
Mozambique	Karen Cavanaugh, Tim Quick	Roxanna Rogers, Subhi Mehdi	Cathy Bowes	Kate Crawford, David Stanton	Roxanna Rogers	--	Deborah Mendelson AFR/SA	Okey Nwanyanwu, Chris Barratt
Namibia	Shyami de Silva, Carrie Whitlock	Peter McDermott Ishrat Husain	Cathy Bowes	Harriett Destler, Gary Newton	Ishrat Husain	--	Rosalind Best EE/OM/OD	Kirk Lazell
Senegal	Frances Davidson, Ellen Lynch	Ron MacInnis, Khadijat Mojidi	Kristen Frank	Alan Getson, Kate Crawford	Ron MacInnis	--	Stephen Grant AFR/WA	Felix Awantang, Sara Holtz, Brad Barker

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As of 3/18/02

Country	Global Country Coordinator*	AFR/SD Technical Rep	G. Regional Coordinator	Global HIV/AIDS Advisor	AFR Bureau HIV/AIDS Advisor	Global Senior Advisor	AFR Bureau Desk Officer	Mission Contacts
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Regional Initiatives

REDSO/E	Ellen Lynch , Beth St. Clair,	Subhi Mehdi , Hope Sukin	Ellen Lynch	Linda Sussman , Harriett Destler, Beth St. Clair	Roxanna Rogers , Ishrat Husain	Scott Radloff	Kimberley Lucas AFR/AA/GHAI	Leslie Perry , Janet Hayman, Gil Cripps, Alix Grubel, Mary Pat Kieffer
West Africa Regional Program (WARP)/FHA	Nicole Buono , TBD	Khadijat Mojidi , Ron MacInnis	Kristen Frank	David Stanton , Alan Getson		TBD	Stephen Grant AFR/WA	Felix Awantang (Senegal), Valerie Koscelnik (Abidjan), Jim Allman, Willibrord Shasha
Greater Horn of Africa (GHAI)	Jim Heiby		Ellen Lynch	Linda Sussman		TBD	Kimberley Lucas AFR/AA/GHAI	Lynne Cripe

Transition Countries

Burundi	Kate Crawford		Ellen Lynch	Kate Crawford		--	Dominic D'Antonio AFR/EA	Jim Walsh (Acting) , Leslie Perry
Liberia	Cathy Bowes	Mary Harvey , Connie Davis	Kristen Frank	David Stanton	Ron MacInnis , Roxanna Rogers	--	Stephanie Garvey AFR/WA	Adams Lincoln
Sierra Leone	Kristen Frank , Sandra Jordan		Kristen Frank	Kate Crawford		--	Stephanie Garvey AFR/WA	David Atterberry (from 01/02)
Somalia	TBD	Subhi Mehdi , Jyoti Schlesinger	Ellen Lynch	Kate Crawford		--	Lily Beshawred COMP/YOC/COOP	Jim Walsh , Leslie Perry
Sudan	Lisa Childs	Subhi Mehdi , Nithya Mani	Ellen Lynch	Kate Crawford		--	Emily McPhie AFR/EA/PA	Haidar Ahmed , Jim Walsh

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Population Health & Nutrition Joint Programming & Planning Teams (JPPT)

Region: ANE: Doug Heisler, Chief

BGH Regional Coordinator: Kristen Frank, kfrank@usaid.gov and Cathy Bowes, cbowes@usaid.gov

BGH Regional Assistant: Yvette Gonzalez, ygonzalez@pal-tech.com

Country	Global Country Coordinators*	Global Sr. Advisor	Desk Officer	Regional Technical Rep.	Mission Contacts
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Programming Countries

Bangladesh	Barbara Seligman, Murray Trostle	Paul Ehmer/ Betsy Brown	Bernadette Bundy ANE/ESA	Gary Cook, Lily Kak ANE/SPOTS	Jay Anderson, Charles Llewellyn, Matt Friedman, Zareen Khair, Moslehuddin Ahmed, Shiril Sarcar, Elmira Gilbert, Kanta Jamil, Belayet Hossain
Egypt	Bob Emrey, TBD	Margaret Neuse	Raouf Youssef/ Lynn Mason ANE/MEA/E	Gary Cook Lily Kak ANE/SPOTS	Chris McDermott, Brenda Doe, Nahed Matta, Mark White, Ayman Abdel Mohsen, Turhan Noury, Cheryl Robinson, Milly Howard, Alia El-Mohandes, Shadia Attia, Sameh El-Gayyar, Emad Yanni
India	Shanti Conly, Frances Davidson	Duff Gillespie	Nancy Eslick ANE/ESA	Lily Kak Gary Cook ANE/SPOTS	Victor Barbiero, Sheena Chhabra, Beth Ann Moskov, Dora Warren, Samaresh Sen Gupta
Indonesia	Mark Rilling (Acting CC during Irene Koek's leave) Maria Francisco (Acting Alternate)	Carol Carpenter-Yaman	Woody Navin (Carolyn Redman - East Timor) ANE/ESA	Doug Heisler, Andrew Clements ANE/SPOTS/SPTS	Molly Gingerich, Lynn Adrian, Ratna Kurniawati, Jonathan Ross, Joy Pollock, Carol Rice, Alene Gelbard, Sri Durjati Boediharjo, Pam Wolf
Morocco	Norma Wilson, TBD	Joyce Holfeld	Sara Borodin/ Elaine Scott ANE/MEA	Gary Cook Doug Heisler ANE/SPOTS	Susan Wright, Zohra Lhaloui, Taoufik Bakkali
Nepal	Richard Greene, Megan Fotheringham	Duff Gillespie	Bernadette Bundy ANE/ESA	Lily Kak Gary Cook ANE/SPOTS	Rebecca Rohrer, Cathy Thompson, Anne Peniston, Terry Murphy, Pancha Kumair Manandhar, Lyndon Brown, Pangday Yonzon, Dharmpal Prasad Raman
Philippines	TBD Glenn Post	Carol Carpenter-Yaman	Calista Downey ANE/ESA	Andrew Clements Gary Cook ANE/SPOTS	Carina Stover, Jed Meline, Marichi de Sagun, Cora Manaloto, Ephraim Despabiladeras, Reynalda Perez, Charito Remata, Leonardo Dayao, Matilde Villanueva, Remedios Esguerra

*** Only Country Coordinators and Alternate Coordinators are listed. Please contact Global Country Coordinator/Point Persons for the list of entire team members. For corrections or changes please contact Nahoko Nakayama at 202-661-0381, nnakayama@pal-tech.com**

Country	Global Country Coordinators*	Global Sr. Advisor	Desk Officer	Regional Technical Rep.	Mission Contacts
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Special Circumstance Countries

Cambodia	Monica Kerrigan, Clydetta Powell	Duff Gillespie	Toni Ferrara ANE/ESA	Lily Kak, HIV/AIDS Fellow ANE/SPOTS	Paljor Ngudup Chantha Chak
Pakistan	Maureen Norton, Jim Griffin	Carol Carpenter-Yaman	Jeanne Pryor ANE/ESA	Doug Heisler, Gary Cook ANE/SPOTS/SPTS	n/a
Afghanistan (task force)	Mary Ellen Stanton, Steve Hawkins	Carol Carpenter-Yaman	Jeanne Pryor ANE/ESA	Doug Heisler, Gary Cook ANE/SPOTS/SPTS	n/a
West Bank/Gaza	Lisa Childs, Cathy Bowes	Margaret Neuse	Curt Wolters/ Linda LeDuc ANE/MEA/WB/G	Doug Heisler, Lily Kak ANE/SPOTS/SPTS	Sherry Carlin, Suzy Srouji, Taroub Faramand

Planning Countries

Vietnam	Dale Gibb, Tim Meinke	--	Toni Ferrara ANE/ESA	Doug Heisler, Andrew Clements ANE/SPOTS/SPTS	Mark Rasmuson
Jordan	Bob Emrey, Maureen Norton	--	Meredith Scovill ANE/MEA/JL, Elaine Scott ANE/MEA/MOR	Doug Heisler, Lily Kak ANE/SPOTS/SPTS	Bill Goldman, Salwa Bitar Qteit, Sana Naffa
Yemen	Lisa Childs	--	Vernita Fort ANE/MEA	Gary Cook, Doug Heisler ANE/SPOTS	Fawzia Youssef, Abdul Ali Al-Sham

Population Health & Nutrition Joint Programming & Planning Teams (JPPT)

Region: E&E, Mary Ann Micka, Chief

BGH Regional Coordinator: Willa Pressman, wpressman@usaid.gov

BGH Regional Assistant: Upama Khatri, ukhatri@pal-tech.com

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Special Circumstance Countries					
Turkey	Pinar Senlet, Elaine Roman	Nicholas Studzinski EE/ECA/ST	Mary Jo Lazear EE/EEST/HRHA	Maria Busquets, Monica Kerrigan, Carrie Whitlock	Duff Gillespie
Russia	Kerry Pelzman, George Oswald, Nikita Afanasiev, Natalia Voziianova, Olga Kulikova, Lara Petrosian,	Inga Litvinsky EE/NCA	Paul Holmes EE/EEST/HRHA	Willa Pressman, Michael Zeilinger	Betsy Brown

Country	Mission Contacts	Desk Officer	Bureau Contacts	Global Technical Advisors
Planning Countries				
West/NIS-Region Office (Ukraine, Moldova, Belarus)	Marilyn Schmidt, Pam Mandel, Boris Uspensky, Olena Radziyevska	Bob Wallin, Jeanne Briggs EE/NCA/WN	Division Chief, Health Reform & Humanitarian Assistance: Mary-Ann Micka EE/EEST/HRHA	BGH Regional Coordinator: Willa Pressman (G E&E Country Backstop)
CAR/Regional and Kazakhstan (also supporting other CAR missions)	Jennifer Adams, Mary Skarie, Indira Aitmagambetova, Sholpan Makhmudova, Almaz Sharman	Fred Wayne McDonald EE/NCA/CAR	Strategy: Paul Holmes	Child Survival & Infectious Disease: Emily Wainwright
Kyrgyzstan	Tatiana Dementeyeva		HIV/AIDS, Child Survival: Bonnie Ohri	Tuberculosis: Amy Bloom, Emily Wainwright, Michael Zeilinger
Uzbekistan	Andreas Tamberg, Alisher Ishanov, Jim Goggins		Infectious Disease: Tim Clary	HIV/AIDS: John Novak
Tajikistan	Aziza Khamidova		Women's/Reproductive Health: Mary-Jo Lazear	Women's/Reproductive Health: Willa Pressman
Turkmenistan	Elena Samarkina		AIHA/Health Reform: Forest Duncan	Maternal Health: Patricia Stephenson, Mary Ellen Stanton
Albania	Doug Palmer Zhaneta Shatri	Roslyn Waters-Jensen EE/ECA/ST	Communications: Sangita Patel	Pharmaceutical Mgt.: Tony Boni
Romania	Susan Monaghan, Gabriella Paleru	Roslyn Waters-Jensen EE/ECA/ST		Environmental Health: John Borrazzo
Armenia	James Van DenBos, Anna Grigoryan, Edna Jonas, Marshall Fischer	Robin Phillips EE/NCA		
Georgia/ Azerbaijan	Kent Larson, Catherine Fischer, George Mataradze, Bill McKinney	Robin Phillips EE/NCA		
Bulgaria	Dontcho Barbalov	Nicholas Higgins EE/ECA/ST		
Croatia	Genevieve Abel	Anne Convery EE/ECA		
Lithuania	Giedra Gureviciute	Ron Ulrich EE/ECA/NT		

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Population Health & Nutrition Joint Programming & Planning Teams

Region: LAC, Carol Dabbs, Chief

BGH Regional Coordinator: Mary Vandenbroucke, mvandenbroucke@usaid.gov

BGH Regional Assistant: Michelle Young, myoung@pal-tech.com

Country	Global Country Coordinators*	Global Sr. Advisor	Desk Officer	Bureau Technical Rep.	Mission Contacts
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Programming Countries

Peru	Elizabeth Fox, Estelle Quain	Margaret Neuse	Joseph Dorsey LAC/SAM	Jennifer Luna LAC/RSD	Dick Martin, Christine Adamczyk
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Special Circumstance Countries

Brazil	Ellen Starbird, John Novak	Betsy Brown	Laura Libanati LAC/SAM	Susan Bacheller LAC/RSD/PHN	Lawrence Odle, Glenn Sessions, Jaime Rojas
Haiti	Dale Gibb, Lisa Luchsinger	Anne Peterson	Sonya Heller LAC/CAR	Logan Brenzel LAC/RSD	Carl Abdou Rahmaan
Mexico	Lisa Luchsinger, Maria Busquets	Paul Ehmer/ Betsy Brown	Michael Kerst LAC/CEN	Susan Bacheller LAC/RSD/PHN	Paul White, Nancy Alvey

Country	Global PHN Point Persons*	Sr. Advisor	Desk Officer	Country Coordinator	Mission Contacts
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Planning Countries

Bolivia	Katharine Kreis, Wyman Stone	--	Laura Libanati LAC/SAM	Jennifer Luna LAC/RSD	Susan Brems, Charles Oliver
Dom. Republic	Lisa Luchsinger, John Austin	--	Richard Steelman LAC/CAR	Logan Brenzel LAC/RSD	David Losk, Sarah Majerowicz
Ecuador	Anthony Boni, Chris Schaffer	--	Sarah-Anne Lynch LAC/SAM	Jennifer Luna LAC/RSD	Ken Farr
El Salvador	Deborah Lans, TBD	--	Michael Kerst LAC/CEN	Roger Dixon LAC/RSD/PHN	Connie Johnson, Karen Welch, Raul Toledo
Guatemala	Anne Terio, Sam Kahn	--	Rob Kahn LAC/SAM	Roger Dixon LAC/RSD/PHN	Mary Ann Anderson, Edward Scholl, Baudilio Lopez
Guyana	Clif Cortez	--	Richard Steelman LAC/CAR	Marguerite Farrell LAC/RSD	Carol Becker, Julia Rehwinkel
Honduras	Karen Cavanaugh, Kellie Stewart	--	Aler Grubbs LAC/CEN	Roger Dixon LAC/RSD/PHN	John Rogosch, Meri Sinnitt
Jamaica	Leola Thompson, Sam Kahn	--	Dan Riley LAC/CAR	Marguerite Farrell LAC/RSD	Jennifer Knight-Johnson
Nicaragua	Anne Terio, Anne Marie McIntosh	--	Susie Clay LAC/CEN	Roger Dixon LAC/RSD/PHN	Katie McDonald, Alonso Wind
Paraguay	Mary Vandenbroucke Elizabeth Fox	--	Laura Libanati LAC/RSD	Jennifer Luna LAC/RSD	Graciela Avila

Regional Initiatives

Central America (HIV/AIDS)	Clif Cortez, John Novak	--	TBD	Marguerite Farrell LAC/RSD	Stan Terrell
Caribbean	Clif Cortez	--	Dan Riley LAC/CAR	Marguerite Farrell LAC/RSD	Joan Atkinson (Jamaica)

* Only Country Coordinators and Alternate Coordinators are listed. Please contact Global Country Coordinator/Point Persons for the list of entire team members.
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Transitional Bureau for Global Health Directory

Major revisions and office designations will be made after the reorganization package has been approved

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Policy & Evaluation

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Nutrition and Maternal Health

Chung, Eunyong	(202) 712-4786
Herr, Rachel	(202) 712-0774
Kahn, Samuel	(202) 712-0785
Reidy, Kate	(202) 661-0385
Stanton, Mary Ellen	(202) 712-4208
Stephenson, Patricia	(202) 712-0989

OFFICE OF HIV/AIDS

Delay, Paul - Acting Director	(202) 712-0683
Alrutz, Neen	(202) 712-1733
Bloom, Amy	(202) 712-0693
Brandi, Doug	(202) 712-1917
Bushman, Gabrielle	(202) 712-5134
Cortez, Clif	(202) 712-0676
Crawford, Katherine	(202) 712-4409
Destler, Harriett	(202) 712-4908
Ethington, Krista	(202) 712-5407
Getson, Alan	(202) 712-5712
Gibbons, Amanda	(202) 712-4728
Halperin, Daniel	(202) 712-4529
Jennings, Gerald	
Lee, Bessie	(202) 712-4822
Novak, John	(202) 712-4814
Post, Glenn	(202) 712-5541
Smith, Jaynell	(202) 712-4917
St. Clair, Elizabeth	(202) 712-5407
Stanton, David	(202) 712-5681
Sussman, Linda	(202) 712-5942
Wolf, Pamela	(202) 712-4626

OFFICE OF FIELD & PROGRAM SUPPORT

Carpenter-Yaman, Carol - Director	(202) 712-0375
Newton, Gary - Acting Director	(202) 712-5912
Bowes, Cathy	(202) 712-1894
de Malvinsky, Jean	(202) 712-5884
Frank, Kristen	(202) 712-1413
Gibson, Mike	(202) 661-0374
Gonzalez, Yvette	(202) 661-0373
Khachatourian, Alina	(202) 712-4715
Khatri, Upama	(202) 661-0384
Lynch, Ellen	(202) 712-5476
Nakayama, Nahoko	(202) 661-0381
Pressman, Willa	(202) 712-0187
Vandenbroucke, Mary	(202) 712-4758
Young, Michelle	(202) 661-0383

New Entry Professionals

Davis, Elizabeth	(202) 712-1555
Dunford, Polly	(202) 712-0935
Dunlop, John	(202) 712-5985
Etian, Sylva	(202) 712-4799
Friedmann, Jeannie	(202) 712-4038
Fung, Christian	(202) 712-1266
Godfrey, Nancy	(202) 712-4251
Hirschey, Ann	(202) 712-4445

Kolstad, Randy	(202) 712-4488
Malanick, Cheryl	(202) 712-1736
Marsh, Shannon	(202) 712-1783
Musah, Aleathea	(202) 712-5649
Panther, Kathy	(202) 712-0829
Phillips, Kendra	(202) 712-4558
Sancho, Margaret	(202) 712-0673
Thollaug, Susan	(202) 712-0715

Africa

Sukin-Klauber, Hope - Chief	(202) 712-0952
Buckingham, Warren	(202) 219-0468
Davis, Connie	(202) 219-0474
Dempsey, Holly Fluty	(202) 712-5018
Ettling, Mary	(202) 219-0486
Few, Felicia	(202) 712-0652
Harvey, Mary	(202) 712-5483
Heffner, Jason	(202) 219-0483
Husain, Ishrat	(202) 219-0477
MacInnis, Ron	(202) 219-0473
Mani, Nithya	(202) 219-0476
McDermott, Peter	(202) 219-0503
Mehdi, Subhi	(202) 712-5101
Mojidi, Khadijat	(202) 712-1845
Rogers, Roxana	(202) 712-0933
Schlesinger, Jyoti	(202) 219-0484

Asia & Near East

Heisler, Doug - PHN Team Leader	(202) 712-5004
Clements, Andrew	(202) 712-4218
Cook, Gary	(202) 712-0707
Kak, Lily	(202) 712-1784
Pick, Billy	(202) 712-4911

Europe & Eurasia

Micka, Mary Ann - Chief	(202) 712-4781
Clary, Tim	(202) 712-0588
Duncan, Forest	(202) 712-4934
Holmes, Paul	(202) 712-1239
Irika, Linda	(202) 712-1466
Jimenez, Robert	(202) 712-4443
Korin, Michael	(202) 712-1465
Lazear, Mary Jo	(202) 712-5595
Ohri, Bonnie	(202) 712-1018
Patel, Sangita	(202) 712-0575

Latin America & Caribbean

Dabbs, Carol - Chief	(202) 712-0473
Bacheller, Susan	(202) 712-5905
Brenzel, Logan	(202) 712-0146
Dixon, Roger	(202) 712-0432
Farrell, Marguerite	(202) 712-0458
Luna, Jennifer	(202) 712-0537

LPA

Lester, Robert - Acting Director	(202) 712-4350
Bennett, Barbara	(202) 712-4041
Cahill, Sharon	(202) 712-4223
Cook, Bette	(202) 712-4075
Hearne, Kathleen	(202) 712-4008

Rayburn, Dottie	(202) 712-4416
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M/OP/G/PHN

Atsalinos, Mike	(202) 712-1039
Conrad-Benson, Charity	(202) 712-5078
Fuller, Georgia	(202) 712-0551
Lewis, Sarah	(202) 712-1108
McKeirman, Bonnie	(202) 712-0489
Sylvia, Cristina	(202) 712-5566
Thomas, Alfreda	(202) 712-1202

WID

Blakeslee, Katherine	(202) 712-0570
Knox, Mary	(202) 712-0978

BHR

Lutjens, Sheila	(202) 712-5734
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PPC

Apter, Felice	(202) 712-5783
Austin, Mark	(202) 712-1001
Berger, Rene	(202) 712-0485
Blumhagen, Dan	(202) 712-5816
Boyer, Robbin	(202) 712-4489
Cornelius, Dick	(202) 712-4615
Huber, Amanda	(202) 712-5418
Schofield, Ken	(202) 712-5820
Turner, Barbara	(202) 712-5820

GC/G

Kitay, Michael	(202) 712-5019
Pascocello, Susan	(202) 712-0559
Patterson, Jerome	(202) 712-0529

G/AMS

Colwell Brenda	(202) 712-1485
Jordan Lennie	(202) 712-5099
Naranjo Carmen	(202) 712-4213
OP	(202) 216-3132
Tumblin Margie	(202) 712-4245

G/PDSP

Landau, Ted - Director	(202) 712-1538
Kreslins, Dagnija - Deputy Director	(202) 712-0762
Dobbins, Lorie	(202) 712-1805
Williams, Cheryl	(202) 712-0563

Fax Numbers

AFR G Street	(202) 219-0518
AFR/SD/HRD	(202) 216-3466
ANE/SPOTS	(202) 216-3171
E&E/EEST/HRHA	(202) 216-3409
HN	(202) 216-3702
LAC/RSD	(202) 216-3262
LPA	(202) 216-3237
OFPS/POP	(202) 216-3046
PaL-Tech	(202) 783-2767
PLP	(202) 661-8029
POP Front Office	(202) 216-3485
Research	(202) 216-3404

Please contact Jen Coons for additions/deletions/corrections at pdesk@usaid.gov or 202-712-4958

Other Important Numbers

Natsios, Andrew - Administrator (202) 712-4040

Administrative Assistants

A Desk, (202) 712-4549
Health Desk, (202) 712-5933
OFPS Desk, (202) 712-4715
POP Desk, (202) 712-4958